



OFFICE OF THE COUNTY MEDICAL OFFICER OF HEALTH,
14, TEMPLE STREET, BIRMINGHAM,

September 7th, 1911.

TO THE WARWICKSHIRE COUNTY COUNCIL.

MR. CHAIRMAN, MY LORDS AND GENTLEMEN,

1. I have the honour to present my twelfth Annual Report as County Medical Officer of Health, and the twenty-second I have made to your Council on the health of the Administrative County.
2. I propose to adopt the same system as in my last Reports, namely, to deal with the County as a whole, and then complete the Report by summarising those of the District Medical Officers of Health. In the statistics the birth, death, and Zymotic death-rates are calculated per 1,000 persons estimated to be living, while the Infant Mortality is reckoned on the number of children who died under one year of age per 1,000 registered births.

THE COUNTY AS A WHOLE.

AREA.

3. The area of the County in acres taken from the figures in the Reports of the District Medical Officers is as follows:—In the Urban Districts 54,777 and in the Rural Districts 496,312, giving a total for the County of 551,089.

POPULATION.

4. According to the figures given by the District Medical Officers of Health, the population in the middle of the year is put down as 415,108. I am absolutely convinced in my own mind that when the Census Returns are available—which will doubtless be the case before this Report is issued, that this estimate of population will be much too high. Last year I stated that I considered the estimate for 1909 excessive, and as the same method—that of the Registrar General—for estimating the population of Aston has been used, and as it is certain that no increase of population has taken place there, it follows that the estimate must be excessive. On the other hand, possibly the population of some of the Rural Districts has been taken as too low, but looking at the County as a whole, I feel sure that the estimate as taken from the local reports for last year will be several thousands more than the Census proves to be the case. The most marked increases have been shown in the Districts of Erdington, Nuncaton, Sutton Coldfield, Foleshill, Solihull, and Tamworth, while in the little District of Coventry Rural the estimated population shows an increase of 50 per cent., due it is believed to the development of cycle and motor works on the outskirts of Coventry. Personally I am inclined to consider the population to be somewhere about 403,000, adopting the figures however which are the only ones I can use officially, the population of the Urban Districts as a whole, is estimated as 254,686, and that of the Rural Districts as 160,422.

BIRTHS.

5. Nine thousand eight hundred and sixty Births were registered during the year, compared with 9,835 and 10,308 in the two previous years. Calculated on the estimated population, the birth-rate appears as 23·7, 0·7 lower than in the previous year. As a matter of fact however I doubt if there was very much difference, the number of births being almost identical. The greatest fall in the birth-rate is shown in the Urban Districts, where the figure is only 22·8. In the Rural Districts it was 25·1, compared with 25·6 in the previous year.
6. In the Urban Districts, the highest rate was shown at Nuneaton, where it was 32·2, closely followed by Bulkington with a rate of 30·3. In no other instance did the rate exceed 25. The lowest rate is shown at Leamington where it was only 15·1, while the next lowest was at Sutton Coldfield, with a rate of 18·4.
7. In the Rural Districts the highest rate was shown at Foleshill, where it was 34·1, closely followed by Tamworth and Atherstone, with 32·5 and 31·3 respectively. The lowest rate was shown at Coventry where it was 11·1, the next lowest being Warwick, with a rate of 16·9.

DEATHS.

8. Four thousand eight hundred and forty-four deaths were registered in the County during the year, namely, 2,801 in the Urban, and 2,043 in the Rural Districts. This gives us on our estimated population an extraordinary and satisfactory death-rate, namely 11·6. This is by a good deal the lowest death-rate ever recorded, and even supposing the enumeration of the people shows the population to be too high, there is little doubt that after making allowance for wrong estimates, the death-rate will still be the lowest ever recorded.
9. Among the Urban Districts the lowest death-rate is shown at Rugby, where it was only 7·8, but in Erdington and Sutton Coldfield it was below 10, and in the Borough of Nuneaton exactly 10. The highest death-rate was in Bulkington with 15·4, closely followed by Leamington with a rate of 14·7.
10. In the Rural Districts the lowest death-rate is seen in the little District of Coventry, where it was 3·3. In Nuneaton it was 8·6, and in Farnborough 9. The highest rate was observed at Brailes, where it was 15·7, while at Southam it was 14·9.

ZYMOTIC DISEASE.

11. Three hundred and fourteen deaths were registered from the seven principal Zymotic diseases, compared with 361 and 351 respectively in the two previous years. This gives us a Zymotic death-rate of 0·7, considerably lower than in the two previous years. The deaths registered were as follows:—Smallpox 0, Measles 44, Scarlet Fever 45, Whooping Cough 81, Diphtheria 56, Typhoid Fever 15, and Diarrhœa 73. The main point of difference compared with the previous year is that there was a diminished mortality from Measles and an increased mortality from Scarlet Fever. The deaths from Diphtheria and Typhoid Fever remain almost exactly as in the previous year.
12. SMALLPOX.—Not a single case of Smallpox was reported throughout the County, while in the previous year it may be remembered that only one was notified.

13. MEASLES.—I have already on many occasions dealt with the incidence of this disease and explained that it is chiefly a disease of early childhood, which tends to become epidemic and produce an increased mortality every second or third year. In 1908 there was a very slight mortality, only 31 deaths occurring. In 1909, 127 deaths occurred, while in the year under review, namely 1910, the mortality has again fallen to what may be termed normal, namely 44. Of these 44 deaths, 24 occurred in the Urban and 20 in the Rural Districts.

14. It will be noticed that the figures are much in proportion to the population. When a marked epidemic prevalence is observed it is found however that there is a much greater mortality in the Urban than in the Rural Districts, because of the greater chance the disease has of spreading.

15. During the year a special effort was made in conjunction with the Officers of the Sanitary Authorities and the School Teachers to deal with Measles on a more comprehensive plan than in the past. I arranged that School Teachers should notify all cases, or suspected cases to me as School Medical Officer, as well as to the District Medical Officers concerned. In some of the Districts at least, efforts were made by visiting the infected houses, to induce parents to treat the disease with due importance, not always with success but still with a certain amount of success. Unhappily in some of the Districts very little work of this sort was done, but I hope with a continuance of the system to be able in the future to influence the mortality to some extent.

16. SCARLET FEVER.—This disease has been responsible for 45 deaths, of which 22 occurred in the Urban and 23 in the Rural Districts. The number of cases notified has been 2,002, so that both in incidence and mortality, the figures for 1910 are not so favourable as in the few previous years.

17. Not only has the disease been more prevalent, but it has been more fatal, for if the death-rate from it had remained the same as in the previous year, the number of deaths having regard to cases, would have been 36 instead of 45.

18. Scarlet Fever in the past has always tended to show an increased prevalence about every fifth year, and therefore it was to be expected, having regard to the record of the past few years that there would be some epidemic tendency observed either in 1910 or 1911.

19. Of the 2,002 cases no less than 1,347 were isolated in hospital, showing that in the County as a whole, there is much appreciation of the value of Hospital isolation, both on the part of the Sanitary Authorities and of the public. In the Urban Districts, Hospital isolation was used in every case except at Rugby and Stratford-on-Avon, and in the latter town only three cases occurred.

20. In the Urban Districts the largest number of cases occurred round Birmingham as a centre, there being 447 in Aston, 145 in Erdington, and 71 in Sutton Coldfield.

21. In the Rural Districts the most marked incidence was in Atherstone, Foleshill, and Tamworth, in fact out of the 1,204 cases in the Rural Districts, over 900 occurred in these three Districts. In Foleshill isolation was very thorough, no less than 333 of the 371 cases being treated in hospital. It is interesting to note that with the exception of Nuneaton Rural, cases occurred in every one of the Rural Districts.

22. DIPHTHERIA AND MEMBRANOUS CROUP.—I am pleased to be able to again report that the number of cases in the year shows a diminution, as was the case in 1909. The total number of cases notified during 1910 was 392, compared with 451 in the previous year. The cases were fairly evenly divided, namely, 194 in the Urban and 198 in the Rural Districts, but the population of the Urban Districts being the larger, this shows an increased incidence in the Rural Districts of 25 per cent. The deaths were practically identical with those of the previous year, the number being 56 compared with 55, showing that as the number of cases was slightly less, the severity of the disease has been a little more marked. This gives us a mortality of 14·2 per cent, very much less than that which used to be observed in days when Anti-toxin was not available.
23. Of the 29 deaths which occurred in the Urban Districts, 8 occurred in Erdington, 8 in the Borough of Nuneaton, and 6 in Aston Manor.
24. In the Rural Districts the mortality was most marked at Tamworth, where 9 deaths were registered. In no other District did more than 5 deaths occur.
25. Coming to cases, we find that in Erdington 51 were notified, 45 in Aston Manor, and in Nuneaton, Rugby and Warwick, the numbers were 21, 20, and 21 respectively.
26. It is interesting to observe that the type of disease varied very largely in different Districts. For instance, the 51 cases at Erdington were responsible for only 8 deaths, while the 21 cases at Nuneaton had a similar number of fatalities.
27. Dr. V. Gray-Maitland refers to the importance of Anti-toxin as a means of reducing the mortality, and urges that in all cases where Diphtheria is a matter of grave suspicion, the injection should be used as soon as possible.
28. I am pleased to be able to record that an undoubted advance has been made throughout the County Districts generally in the provision of Anti-toxin by the Authorities. This matter has been prominently brought forward by the issue of the Diphtheria Anti-toxin (outside London) Order of August, 1910, calling the attention of Councils to the importance of this, and explaining the methods by which, under the Public Health Act, it should be supplied. Most of the Districts in the County, including the eight in the Mid-Warwickshire Combined District, and most of the larger ones, have certainly adopted this Act. In all cases the Reports do not give information on the subject, but before the end of the year I hope to make full investigation of the matter, and endeavour to show the importance of the procedure being adopted throughout each District.
29. As far as I can tell, much more has been done in utilizing the facilities provided by the County Council for the examination of material taken from the throats of persons suffering or suspected to be suffering. In one case, namely that of an Institution at Knowle, in which I was consulted as County Medical Officer of Health, the fight against the disease was most effective, and was based almost entirely on new Bacterial methods. In his Report for the Solihull District Dr. Tangye refers fully to this outbreak, and also to the outbreak at the Union Workhouse, Solihull, in January and February. In January 4 cases were notified immediately after admission from the Rural District of Yardley. Early in February 9 other inmates became infected from the original cases, and matters assumed a serious aspect, as no proper isolation could be arranged at the Infirmary. At a special meeting of the Committee of the Solihull and Meriden Joint Small-pox Hospital it was decided, in view of the emergency which had arisen, to lend that Hospital for the accommodation of these cases from the Workhouse, and in this way what might have been a very serious outbreak was prevented. Referring to this Dr. Tangye says:—"The utter unsuitability of the Infirmary for the reception and treatment of infectious diseases was amply demonstrated, and I understand that this practice is finally abandoned."

30. I think I ought, too, under this head to mention the value of Bacteriology in dealing with doubtful cases of sore throats found during Medical Inspection of School Children. In many instances, notably when an outbreak threatened at Erdington in the Autumn, swabs were taken by the Assistant County Medical Officer of Health, and several cases showing no clinical symptoms were proved to be Diphtheritic, and were thus prevented from being a danger to other unaffected children in the School.
31. WHOOPING COUGH.—This disease during the year—as so often happens—was responsible for more deaths than any other of the infectious diseases, no less than 50 in the Urban and 31 in the Rural Districts. In the previous year the number of deaths was almost identical with that of the year under review.
32. It is almost entirely a disease of infant life, and the chief opportunity we have of dealing with it at the present time is in connection with Infant Schools, where it is a common source of trouble. Although a non-notifiable disease under the Act, the arrangements I have made with the School Teachers, on the lines of the Memorandum of the Local Government Board and Board of Education, have enabled me in many instances—and also the District Medical Officers of Health—to do some little in preventing the spread when it has been at times epidemic. Very little however can be done. In a large number of cases the disease is never diagnosed, and it is the neglect to call in Medical advice that so often leads to Pneumonia and Bronchitis following, resulting frequently in death. As in so many other instances in modern Sanitation, it would appear that in dealing with this disease, the best thing that can be hoped for is the education of the rising generation, in elementary hygienic knowledge, so that while the disease may be comparatively common, a knowledge of what is necessary in the treatment of the young patients, will prevent the present excessive mortality.
33. FEVER, INCLUDING TYPHOID AND OTHER CONTINUED FEVERS.—Our record as regards the incidence of Fever is again a very excellent one. The number of deaths, with an increased population, is the same as last year, namely 15, and what is equally strange is that the same number of cases occurred both in the Urban and Rural Districts as in 1909, namely 9 and 6 respectively. When we however consider the cases, our record still shows a marked improvement for only 77 cases were registered, namely 53 in the Urban and 24 in the Rural Districts, compared with 98 in the previous year.
34. In the Urban Districts practically half of the cases occurred in the Borough of Aston Manor, namely 26 out of 53. In Erdington 8 cases were registered, and the same number each in Nuneaton and Rugby.
35. In the Rural Districts Atherstone was the only one which showed a marked prevalence, 8 cases being recorded here, and a total of 24 for the whole of the Districts. The only other Districts from which cases were notified were Foleshill, Rugby, Southam and Warwick.
36. DIARRHŒA.—Our record for this disease is again satisfactory, the total number of deaths registered being 73; 45 in the Urban and 28 in the Rural Districts. This is slightly higher than in the previous year, but compares quite favourably with the totals of the two previous years.
37. Diarrhœa is almost exclusively a disease fatal to infants, and though pre-disposed to by insanitary conditions, largely associated with defective housing, still is chiefly affected as regards its incidence, by the temperature prevailing during the summer and autumn. In cold wet years, such as that of 1910, it is almost certain that the Death-rate from it will be low, and such was the case. Forty-five of the deaths occurred in the Urban, and 28 in the Rural Districts.

38. Almost the whole of the mortality in the Urban Districts occurred in Aston Manor and Nuneaton, no less than 37 of the 45 deaths being registered in these two Boroughs.
39. In the Rural Districts 15 or more than 50 per cent. of the mortality occurred in Foleshill. In Atherstone 5 deaths were registered, but in no other District did the number exceed 2.
40. Though as I have stated above, the chief cause of prevalence of Diarrhoea is a climatic one, yet very much can be done by advising mothers on the keeping in a proper state of their premises, particularly their food stores, and this has been done to a larger extent than ever before, by the County Health Visitors, though they have also done admirable work in advising mothers to feed their infants on physiological lines, always by the breast if possible, but if not, to take such precautions in preventing contamination of milk as are possible under the circumstances. Cleanliness of yards and the removal of household refuse has also an important bearing on this matter, and the improvements being effected by Sanitary Authorities year by year, are all tending to the end of diminishing the Diarrhoeal Death Rate.
41. **PHTHISIS AND OTHER TUBERCULAR DISEASES.**—The total number of deaths registered from Phthisis during the year was 333, while in the case of other tubercular diseases the number was 109. This gives us a total for the County of 442, a number exactly mid-way between that of the two previous years. In the Urban Districts the number of Deaths from Phthisis was 204, and in the Rural Districts 129. It will thus be seen that the Deaths from Tuberculosis of the Lungs or Consumption, again exceeded all those of the Zymotic diseases taken together, and this speaks very forcibly of the importance of sustained and co-ordinated effort for the purpose of reducing the mortality from this disease. There is not the slightest doubt that a considerable proportion of this mortality is unnecessary. There is little doubt, too, that with all available co-ordinated power more might be done in its reduction than in that of many other infectious diseases. I am convinced that a great deal more is being done in the County than ever before, to reduce the mortality, but at present little is being done generally compared with that which might be effected.
42. Consumption is an Infectious Disease, though very different in many respects to many other Infectious Diseases. The principle of isolation must be adopted in many cases if we are to deal satisfactorily with it. 1910 will always be memorable as the year in which the Lord Lieutenant appealed to the County as a whole, to help him to establish a Sanatorium for persons suffering from this disease. Active work was carried on during the latter part of the year, and headway was made towards attaining the end in view, and although at the time of writing legislation is foreshadowed which will enable the disease to be dealt with from a National point of view, there will always be room for properly directed local effort. The problem is a vast one and can only be dealt with as the public become aware of the possibilities of prevention and cure. At the present time, however, we have no Sanatorium in the County nor any Institution devoted to the treatment of Consumptive patients. In all cases where persons are known to be suffering the County Council Health Visitors visit, advise as to what can be done under the local conditions, explain as to the necessity of steps being taken to prevent infection, and in some instances they have been successful in obtaining Institutional treatment, particularly for children, owing to the charitable help obtained from residents in the neighbourhood.

43. In connection with this, at the Annual Conference of Sanitary Authorities, I introduced the question of the utilization of the Smallpox Hospitals for treating Phthisical cases during the periods between Smallpox epidemics. I regret that no marked response has been given. It would appear that the District Councils are unwilling to undertake further responsibilities; but when we consider that these buildings exist, that their capital value is considerable, and that by the very nature of Smallpox, coming as it does, only at times, it will be seen that these buildings are capable of materially helping us in the way of prevention and cure of a disease, not only in itself more fatal than all the other Infectious diseases, but one which is more fatal at the working periods of life, and therefore tends to disorganize industry, produce poverty, and add enormously to the sum of human misery. If it be desirable to isolate cases of Scarlet Fever and Diphtheria, surely it is more advisable to do something in suitable cases for a scourge which in 1910 killed more than three times as many persons as these two diseases put together.
44. In addition, however, to what may be done by Hospital Isolation a great deal can be done by improving some of the lower class property, particularly in the way of making bedroom windows to open, and the reduction of dampness; but probably more still can be done by explaining to sufferers and those in the house, the danger of infection, and the necessity of taking care of the sputum, which is such a potent cause of harm. I have endeavoured to do something by instruction through the Health Visitors of the elder children in the schools, but we had so much work in the County in other ways that but little time relatively can be given to this important work. Copies of the leaflet I issued some time ago are always left at each house where there is a patient, and explanation of the various suggestions is given in detail.
45. Another point to which I think attention should be given is the question of the possible infective character of the milk supplied in the County. Experiments made of the Milk supplied to Birmingham, Manchester, and other large towns, have shown that a considerable percentage of all samples taken are infected with Tubercle Bacilli. Though much attention is given in Warwickshire to the quality of the Milk from a Chemical point of view, nothing has yet been done in the way of learning its potential infectivity as regards Phthisis and I suggest that your Committee authorise me to obtain a certain number of Bacterial Examinations of Milk taken from various sources, for discovering to what extent danger exists in this direction. The only reliable method is by inoculation experiment of the centrifugalized deposit from milk, and can only be done locally in the Pathological Laboratory of the University. That there is a relation between bovine tuberculosis and that of man has now been definitely proved and this source of infection must not be omitted in considering the general crusade against the disease.
46. I am pleased to be able to report that from the end of the year examination of Sputum in cases of suspected Phthisis has been open to practitioners in the County free of cost, in the same way as swabs from Diphtheria throats, and blood from Typhoid Fever patients, and I hope that in the future much valuable information will be gained, available to the practitioner dealing with early and doubtful cases.
46. Some good no doubt has resulted from the issue in the previous year of the Public Health (Tuberculosis) Regulations, by means of which it was made compulsory on Poor Law Medical Officers to notify the Sanitary Authorities in cases of Consumption coming to their knowledge. A further step has been taken, but was not available during 1910, by means of which all patients attending Hospitals or Dispensaries, not coming

under the Poor Law, must also be notified. In this way much valuable information should be given, and a considerable proportion of existing cases should be brought to the notice of the Sanitary Authorities. Mere notification, however, without following up is of little value and I hope at the next Annual Conference of Sanitary Authorities that this may be one of the matters discussed, with a view to good work being accomplished.

47. It is with great satisfaction that I note in the majority of the Reports that disinfection of premises and bedding is now largely undertaken after fatal cases of Phthisis. This is undoubtedly of considerable value, but it is as nothing compared with what may be done by efforts to control the action of patients during life, which, with the education of the public now taking place, will become year by year more easy to effect. I hope that during the present year every District Council will, on the advice of its Medical Officer of Health, agree to provide free of cost, suitable disinfectants for all cases of Phthisis known to exist in their Districts.

48. CANCER.—Under this head, and including other forms of malignant disease, I note that there has been a slight decrease in the number of deaths registered. The total number of deaths was 361, namely 221 in the Urban and 140 in the Rural Districts. The Death-rate on the estimated population was 0·87, compared with 0·91 in the previous year. The Urban Districts in which Cancer mortality was highest were Kenilworth, Leamington, and Stratford-on-Avon, and in the Rural Districts, Alcester and Solihull.

50. INFLUENZA.—Fifty-seven deaths, namely 27 in the Urban and 30 in the Rural Districts, were registered as due to Epidemic Influenza. The number in the previous year was 96, so that there has been a considerable reduction of mortality.

51. DISEASES OF THE RESPIRATORY ORGANS.—Pneumonia was responsible for 309 deaths, the lowest figure for some years, comparing very favourably as it does with the figure for 1909, which was 409. Bronchitis also showed a less mortality, the figure being 350 compared with 383 and 510 in the two previous years.

INFANT MORTALITY.

52. In 1910, 884 deaths of infants were registered, giving an infant mortality rate of only 89 per 1,000 registered births, compared with rates of 100 and 97 in the two previous years. It is with much gratification that I can report therefore the lowest rate of infant mortality ever recorded in the County.

53. In the Urban Districts 548 deaths were registered and in the Rural 336. In both cases the figures are lower than those of the two previous years. In the Urban Districts the rate was 94 per 1,000 registered births, and in the Rural Districts only 83.

54. On perusing the table I find that in the Urban Districts the highest rate is shown in Bulkington, where the figure was 175, practically identical, though slightly higher than in the previous year. In only two other Districts, namely Aston Manor and Sutton Coldfield, did the rate exceed 100, the figures in these two Boroughs being 109 and 104. The lowest rate in the Urban Districts was in the Borough of Stratford-on-Avon where it was as low as 45, but in Kenilworth it was 53 and in Rugby 60.

55. In the Rural Districts the highest rate is observed in Foleshill, where it was 112, the only Rural District in which the figure exceeded 100. In Monks Kirby, which is of course a very small district, with only 1,480 inhabitants, there was no infant mortality at all, while in the Rural District of Stratford-on-Avon it was only 48.

56. The very satisfactory feature of all the returns for this year is that in no case except Bulkington, is the figure unduly high, and the excellent record rate is achieved by satisfactory returns from nearly every District.

57. I am pleased to be able to report that the excessive mortality reported last year in the case of the Nuneaton District, is no longer in evidence, in fact the rate has come down to 70, which may be considered a normal one. It may be remembered that Miss Chorlton, one of the Health Visitors, gave considerable attention to those parts of the District where the mortality was prevalent, and I have no doubt that her presence and the advice she was able to tender, had a considerable effect in removing many of those conditions which made for infant mortality. On the other hand there should be no disguising of the fact that to some extent at least infant mortality is a question of temperature. I have before pointed out that when the temperature in the middle or end of Summer reaches 56 degrees F. 4-ft. below the surface, then these conditions become operative which conduce to Diarrhœal diseases, one of the chief factors in the production of infant mortality. Last year was a healthy year in this respect, because the summer was cold and wet, but while calling attention to this as being doubtless concerned in our lowered rate, the record of continued reduction year after year is undoubted evidence of improved infantile conditions, and may be attributed I am convinced, to a considerable extent, to the work of the Health Visitors in the various Districts.

58. During the year, 826 first visits were made to infants, and 343 re-visits. In making these visits, I have instructed the Health Visitors to deal with those cases in which their efforts are likely to produce the best result. Of these 826 infants, 634 were found to be breast fed, 105 partially breast fed, 155 entirely artificially fed, and 97 classed as improperly fed. By this I mean that they were fed not only artificially, but improperly as regards the materials used for their diet, such as patent foods, bread and water, and in some instances even more unsuitable materials.

59. I regret to have to record, despite the work that has been done, no less than 389 cases where the so-called "comforter" was used. True it is that in 53 of these it was only used occasionally. It is specially unsatisfactory for me to have to report that as the result of advice and exhortation I can only record that this engine of evil was discontinued in 20 cases, as the result of the Health Visitors advice. I cannot speak too strongly of the mischief done by these "comforters." Not only do they become foul, but frequently they are constructed of unclean material, they drop from the child's mouth to the floor or road, and are frequently replaced without cleaning, so that it is no exaggeration to say that they possess nearly every undesirable attribute one can imagine in connection with infant feeding. As their name implies, the idea is to keep a troublesome child quiet during the intervals between feeding.

60. In the case of artificial feeding, I am pleased to state that as the result of great labour, 79 boat-shaped bottles were being used, compared with 109 long tube bottles. I have before called attention to the importance of this in infant feeding. Not only is it impossible to keep a long tube bottle clean, but they achieve their popularity on account of the fact that infants can be laid down and allowed to suck at these bottles for prolonged periods and after the contents have become sour and even stinking. The advantage of the boat bottle is that not only is cleanliness made more easy, but that personal attention must be given to the child during feeding. Of course it is easy to see the temptation there is to the over-worked mother to use such a bottle, which makes her work lighter, and it will readily be understood the difficulty there

is in educating such mothers to the importance of using a properly designed bottle. I find as the result of inquiries made by the Health Visitors that one reason for the use of the long tube bottle was that the boat shaped variety were not stocked in the smaller villages of the County, and I am pleased to state that through the valuable help of Sir Thomas Barelay, I have been able to make arrangements for proper bottles to be on sale in practically every part of each division of the County.

61. As regards sleeping accommodation, I find that 628 of the infants were in the habit of sleeping in the beds of their parents, and in only 223 cases were cradles or cots used, though every effort is made to induce mothers to provide cots, and they are shown how they can easily make one, both cheap and effective. A great difficulty, too, is the small bedroom accommodation; in many instances I have to admit there is no room for a cot in the bedroom, but of course in a considerable number of cases this difficulty can be overcome, and I am pleased to say that in some instances cots have been provided as a result of the Health Visitors' work.
62. As regards clothing, 578 were wearing woollen under-clothing, and 31 were badly or improperly clothed. Forty-eight only were found neglected, in the opinion of the Health Visitors. Of these, 21 were wilfully neglected, 27 were on account of poverty, while in 18 cases the aid of the N.S.P.C.C. was invoked.
63. As regards the health of the infants, 622 were described as satisfactory, 153 were unsatisfactory, and 28 were definitely wasting. These latter, though a small class, require a great deal of attention, and the time of the Health Visitors has been much taken up with them, and in some instances with the most gratifying results, even in cases where Medical opinion was adverse to the future prospects of recovery.
64. Referring to the health of the mother, in 651 cases this was found to be satisfactory, and in 152 unsatisfactory. As regards employment, 728 were engaged only with house work. Only 34 were factory workers, and in 48 instances such work as charring, etc., was carried out away from home. In 393 instances the mother was reported as doing housework before the fourteenth day after delivery.
65. As regards the dwellings, in 622 instances they were recorded as clean and satisfactory, and in 184 as unsatisfactory.
66. This I think will be admitted by all is a very excellent record of work done. Much more might be done were the Notification of Births Act adopted, as I trust it will be, for the whole of the County. At the present time we have to rely on Midwives and others giving us notification of the births as they occur, quite voluntarily, and though I would not for one instant suggest that were the Notification of Births made compulsory in the County, that every birth would be visited, yet it would enable us much more satisfactorily to carry on supervision in necessary cases, and would effect also a great saving of time and labour, and would allow the work to be done at an early date and therefore more efficiently.
67. I must again call attention to the terrible habit of using sedatives—soothing syrups, powders, etc.—particularly in the Nuneaton District. I cannot believe that parents know the danger of utilizing these, some of which contain morphia and other very dangerous drugs to young infants. I cannot help expressing the opinion that those who sell and advise the use of these preparations are undertaking a responsibility which is very serious. In many instances I have no doubt this is done thoughtlessly, but whether this be so or not, the effect remains and is one which must be extremely serious to the future development of the child if the use of such drugs is long continued.

68. No doubt another factor of importance in dealing with infant mortality is what may be termed the Infant Health Society, an institution where mothers are encouraged to bring their babies as soon as possible after birth, where they are weighed and advice given on points that may arise. The mothers at the same time are helped and advised in matters respecting their own health. Such Societies are not uncommonly found in our large towns, but I am pleased to find one is reported to be doing valuable work in the Borough of Leamington. A similar institution has also been established in Sutton Coldfield, but I am convinced that in the more populous centres there is a want of such institutions.

A SUMMARY OF MATTERS INFLUENCING THE PUBLIC HEALTH, TO WHICH ATTENTION IS DRAWN IN THE REPORTS OF THE DISTRICT MEDICAL OFFICERS OF HEALTH.

69. During the year I continued to circulate throughout the County a form giving all the cases of infectious disease notified during the week. I was enabled to do this through the courtesy of the District Medical Officers of Health, who were good enough to supply me with the Returns of their Districts. The importance of the work carried out is shown by the fact that at the present time the system has become a National one and Notifications are now sent to the Local Government Board each week, the figures being published for the whole of the Country and copies of the Returns forwarded later to each Medical Officer throughout the Country.

ISOLATION AND HOSPITAL ACCOMMODATION.

70. I have little to say this year under this head, and what little I have to say is quite satisfactory in that it is a record of improvement in the institution of Isolation Hospitals in those Districts where accommodation was either wanting or was insufficient. Every District in the County with the exception of Farnborough, has accommodation for Smallpox patients, and steps have now been taken to supply the few remaining Districts previously devoid of fever hospital accommodation with such hospitals. Farnborough still, however, remains a difficulty. It is situated close to Banbury and is so far away from other Hospitals in the County that it cannot very well make any definite arrangement with them, while its population and rateable value is too small for its Council to be expected to establish a Hospital of its own. The matter is referred to in the Report of the Medical Officer of Health who says:—"I hope the Council will make arrangements for dealing with such cases in the future, before there is another outbreak." He was referring to four cases of Scarlet Fever which occurred. It seems to me, looking at the District, situated as it is on the extreme south-east edge of the County, that an effort should be made by the District Council to arrange for accommodation with Banbury or some other District in the neighbourhood.

71. It is with much satisfaction that I record that the new Hospital which was in course of erection at the beginning of the year, for Solihull and Meriden, has been completed. It was opened on October 1st, and Solihull therefore withdrew from its share of the Solihull and Yardley Joint Scarlet Fever Hospital. The new Hospital has accommodation for 14 Scarlet Fever, 8 Diphtheria, and 6 Typhoid Fever cases, and has also a block of four single bed observation wards. The Medical Officer of Health for the Combined District says:—"There can be no doubt that the new Hospital will prove of the greatest value to the two Districts concerned, built and equipped as it is, on the most modern and hygienic plan." Having seen the plans I quite concur in this remark.

72. The only other Districts without Fever accommodation therefore at the end of the year are Rugby—Urban and Rural—and Monks Kirby. This question has been a burning one for some considerable time in these Districts. Much negotiation has taken place and although nothing has been definitely accomplished at the end of the year, I believe that arrangements have since been made, with the approval of the Medical Officer of Health, by means of which Fever accommodation may be provided, and it is to be hoped that this will be available during the present year.
73. I have several times called attention to the condition of the Fever Hospital at Atherstone, and it is with much satisfaction therefore I find in his Report for last year, the Medical Officer of Health says:—"I am very pleased indeed to be able to report that at last a commencement has been made with the new Isolation Hospital at Archer's Hill, Grendon, a well-planned and convenient building of 30 beds."
74. When the points to which reference is made have been attended to, the County will be excellently supplied with Hospital Isolation accommodation. The existing Hospitals in the various Districts have been properly maintained, and rendered good service during the year.

RIVER POLLUTION.

75. Though in the County we had always given very careful attention to this important matter, yet during the year, and particularly the latter end of it, better work has been done than ever before, chiefly owing to the fact that having an additional Assistant Medical Officer of Health enabled me to arrange for a larger number of inspections of Rivers and Sewage Works. In the past we have had to be content with dealing with those works capable of producing major pollutions, but during the year, we commenced the survey of some of the smaller works, and this in the future will be extended, so that better efforts will be possible in the way of maintaining a reasonably pure condition of the Rivers.
76. There are three main Rivers in the County, the Tame, the Anker, and the Avon, while minor streams include the Cole, the Blythe, the Bourne, and certain smaller tributaries. The Tame from the point of view of early pollution and Sewage treatment, first claims our attention. I have before pointed out that during its flow it receives a quantity of Sewage greater than what may be termed the legitimate River water. It comes from Staffordshire into the County at Witton, and passes out of the County again at Tamworth. It receives Sewage or Sewage Effluent almost from the time it comes into existence in Staffordshire, passing as it does, and being the natural outlet of drainage, from the Districts of Tipton, Coseley, Sedgley, Bilston, Darlaston, Willenhall, Walsall, West Bromwich, and Wednesbury, while the large District of Oldbury in Worcestershire, also sends its effluent into the River.
77. As regards the Tame in Staffordshire, before it comes to Birmingham, I referred the matter of pollution to Dr. Reid, the County Medical Officer of Health of Staffordshire, who reports to me as follows:—

"There are two features in South Staffordshire which, as regards sewage disposal add greatly to our difficulties, viz.: difficulty of dealing with trade pollution, and the constant and serious mining subsidences which take place. As an example of the latter I may mention that new and expensive works which have been recently completed at Tipton have been seriously damaged and thrown out of work just at the moment of their completion, and in the case of two areas, namely Coseley and Sedgley, expert mining evidence made it clear to the Committee that general sewerage schemes could not be insisted upon at present.

"For these reasons progress has been delayed, although a great deal has been done, and when certain large works now approaching completion or being constructed are in operation, a greatly improved condition of things will take place, as will be gathered from the following facts:

"TIPTON:—The disposal works are now completed, but they are temporarily thrown out of use, as stated, owing to damage by mining subsidences.

"OLDBURY:—Works have recently been completed at very great cost to take the place of former works which were proved by the County Council to be inadequate, and the effluents now discharged into the stream are satisfactory.

"BILSTON:—Some two years ago efficient works were completed at Bilston, and the effluents discharged from the works are uniformly of a high standard of purity.

"DARLSTON:—Up till a few years ago the sewage disposal works at Darlston were adequate for the purpose, but owing to the rapid extension of the water-carriage system it has become necessary to greatly enlarge the works, and a scheme for that purpose is now being prepared.

"WALSALL:—Extensive and efficient works to take the place of the old inadequate land treatment are rapidly approaching completion, and some sections of the works will in the immediate future be brought into operation.

"WEDNESBURY:—The Wednesbury sewage works have within the last year or two been largely extended, and the effluents discharged from the works are of excellent quality.

"WILLENHALL:—A scheme has recently been approved by the Local Government Board for laying down extensive works to supplement the land treatment, and the construction of the work is about to begin.

"HANDSWORTH AND SMETHWICK are drained to the Birmingham Tame & Rea Drainage Board's Works."

79. It will be seen that much has been done by our neighbours in Staffordshire, although as Walsall with its population of 100,000 or thereabouts has not yet completed its works, there is still evidence of a good deal of pollution when the Tame enters Warwickshire.

80. There is not the least doubt that the large works of the Birmingham Tame and Rea District Drainage Board, situated within the County, have done good work during the year in the removal of the putrescent matter from the effluent discharged into the River. Mr. Watson, the Engineer to the Board, writing to me says:—

"We now have 56 acres of bacteria beds in use, 34 acres of which are exclusively used for the treatment of the dry weather flow; the remaining 22 acres for the excess flow, and are used for a short time each day to keep the beds in a ripe condition.

"Our tankage has not been increased for several years. The last increase, as you are aware, was the construction of a storm water tank capable of holding rather more than 13,000,000 gallons, or about one half the dry weather flow.

“The chief work which we have had in hand this year, apart from the systematic and regular increase of our storm water beds, has been the reconstruction of our outfall sewers, and the construction of a large detritus pit which is being made at Saltley. This detritus pit is 500 feet long, and upwards of 20 feet deep. There will be an electrically operated dredger running to and fro with the object of eliminating at an early stage as much solid matter from the sewage as possible. I am hopeful that this more complete system of sedimentation will have the effect of improving the condition of the liquid sent to the bacteria beds for oxidation.”

81. In the Autumn, certain complaints were made to me that the effluvia from the Works were a great nuisance to certain of the neighbouring districts, notably Water Orton and Castle Bromwich. I made several visits of inspection to the neighbourhood and found that at times, undoubtedly a very serious effluvial nuisance was created, and it is to be hoped that measures will be taken capable of dealing with the smells arising, as at times they undoubtedly militate to a very large extent against the comfort of living in the neighbourhood.
82. The Works at the village of Kingsbury have on the whole been well conducted during the year and the general effluent discharged into the Tame has been generally satisfactory.
83. I am pleased to be able to report that the Works for dealing with the Sewage of Tamworth and surrounding Districts, were completed during the year. The works have been constructed to deal with the sewage of Wilnecote, Bolehall, and Glascote, in the County of Warwick, and Tamworth Borough and Fazeley in the County of Stafford. The works are situated in Staffordshire and consist of a detritus chamber where the heavy material is deposited and also three sedimentation tanks, each fitted with a syphon for the removal of sludge. The tank effluent is treated on eight rectangular filters, the total capacity of which is sufficient to deal with three times the ordinary dry weather flow. The filters are 5 feet deep and are supplied with tank effluent by travelling distributors. The effluent from these beds is treated on land which removes matters in suspension which pass through the filter medium. There is good reason to believe that these Works will be capable of producing an effluent which will prevent the hitherto existing serious pollution of the Tame.
84. As in previous years, much care has been given to the condition of the River Avon. This River—the largest in Warwickshire—receives a considerable quantity of sewage effluent in its course through the County. First of all, the discharge from the new works at Rugby reaches it on the east of the County. The High Level Works have, during the year, been performing their functions very satisfactorily, but the Low Level Works show at times evidence of over-work. In December last, when I inspected these Works, it was quite evident that the Low Level Works were receiving too much sewage to satisfactorily perform their proper functions, and I reported the desirability of two additional filters being laid down as early as possible, not only for preventing further pollution of the river, but also to allow of the maintaining of those existing in a satisfactory condition. I said “It will be no economy to the Rugby District Council to continue the over-taxing of the powers of the existing filters with the result that perhaps at an early date they will require re-constituting at a considerable expense.” I have reason to believe that at the present time plans are in consideration for the necessary extension of the Low Level Works.

85. Kenilworth is the next community sending a considerable quantity of sewage into the River, though not directly. I have nothing but praise for the works here. The Surveyor has given much attention to their management and has undoubtedly solved the difficult problem of producing an excellent effluent, and at the same time dealing satisfactorily with a large quantity of tan yard waste that comes down into this sewage.

86. Coventry, with its population exceeding 100,000, next sends its effluent into the River. The Works at Coventry are irrigation Works, on land extremely suitable for dealing with sewage. As I pointed out in my last year's Report, these Works were laid down when the population was little more than half what the Census has shown it to be at the present time, and though good in design and well managed, the last year or two they have been asked to perform an impossible task. It is therefore with pleasure that I can record that the City Council have received sanction for a Loan for the purchase of about 250 acres of land for the purpose of extending the Farm. This land is of excellent quality, and will be of the greatest value in solving the problem. Experiments have also been carried out with a septic tank and a large bacterial filter under my supervision, and although certain difficulties were found at first in treating the sewage bacterially, these I think have now been overcome, so that the principle on which any extensions for bacterial treatment can be made, may now be considered settled. While writing this Report the Census figures have been issued, and these show a phenomenal increase of population, so much so that I am strongly of opinion that although a much improved result will be produced as soon as the new land is got into working order, yet I feel quite sure that it will be necessary to consider further extensions, either of land treatment or of bacterial filters, or again the quantity of sewage will soon pass the capacity of the land to deal with it. I have on more than one occasion analysed samples of the effluent during the year, and I have also analysed samples of the River Avon itself. Up to the present, the River generally has not been materially affected, though there has been a deterioration of the quality of the effluent, as must of necessity be the case. At Bubbenhall I consider that at times undoubtedly there are signs of some pollution, but below this there has been no marked deterioration. The weir at Bubbenhall undoubtedly allows of the pollution of the River above it being made involuntarily a sort of secondary settling tank, and if conditions of drought and high temperature are long maintained, undoubtedly there is risk of nuisance arising in this portion of the River. I have had no further complaints during the year of effluvia nuisances arising from the Farm area in the neighbourhood of Willenhall.

87. The Borough of Warwick up to the end of the year had done nothing practically to improve the conditions of their effluent, the result being that an insufficiently purified effluent is almost continually being discharged into the River. In addition to this, no pumping of the sewage takes place on Sundays, so that as the tank accommodation is insufficient to hold the whole of the sewage on this day, an overflow of very partially treated sewage must of necessity for some hours gain access to the River near the site of the pumping station. I believe the Warwick Town Council have now satisfied themselves definitely that the condition of affairs is unsatisfactory, and an application has been made for a loan since the close of the year, for the purpose of purchasing land. This land is of better quality than that at present in use, but I do not consider it particularly well adapted for irrigation and sewage filtration. Undoubtedly however an improvement will be effected if this new land be treated properly. I am convinced that the whole question of the sewerage and sewage of the town wants dealing with drastically if a reasonable pure effluent is to be discharged.

88. The condition of the discharge of sewage from Budbrooke Barracks is the same as last year. The sewage is allowed to run and to be treated by irrigation on land below the Barracks. The land is heavy and therefore not particularly well suited for sewage treatment. I have satisfied myself, however, that if care in the distribution of the sewage over an increased area be taken, a fairly satisfactory result may be obtained, but I cannot help feeling that a proper solution of the difficulty would be for the War Office to lay down a modern sewage disposal plant under their own control, capable of treating the Barracks sewage efficiently.
89. Stratford-on-Avon has possessed for some time Works scientifically constructed and excellently managed, and, as a consequence, the effluent has invariably been found to be excellent and non-polluting when discharged into the River. At the same time, effluvia trouble has occurred in the neighbourhood of these Works and experiments have been tried by means of which the effluvia might be reduced or prevented, and I think that as a result of these experiments, carried out by Mr. Bell the Manager, the question may be said to have advanced considerably.
90. KINETON. It will be remembered that in the past these works were not always producing a very satisfactory result, in fact they were at times overworked, and pollution of the brook occurred. One of the beds had part of its filtering material removed during the summer and cleansed, and the condition of the bed when inspected in August was much improved. The effluent produced then was clear and free from odour, and an analysis of it was quite satisfactory. I have reason to believe that since the end of the year it has been decided to further improve the Works here. The septic tank was covered in, and the smell which had previously been complained of at times on the works, has been done away with, and no serious nuisance arose to anyone in the neighbourhood. The brook was quite satisfactory when examined below the Works.
91. At last—after much waiting—the Wellesbourne Works have been commenced. The contractor began operations at the end of September so that before the present year expires there is good reason to hope that the Works will be completed, and fit to deal with sewage, and thus prevent pollution from this source.
92. The Cole is a River which comes into the County near Stechford. Its chief pollution comes from the Works of the Yardley Rural District Council in Warwickshire. During the year the new rectangular filters have been completed, so that the whole of the sewage at the end of the year was being dealt with on this and on the four original circular filters. Before the effluent from the filters is allowed to discharge into the River it passes into settling beds and through sets of lagoons. The storm water is dealt with on special storm beds. The effluent after passing on to land and the filters, goes directly into the River. To prevent these beds becoming ineffective they are treated daily with some small quantity of sewage. Altogether, $2\frac{1}{2}$ acres of filter beds are now available. The river in the autumn showed some slight discolouration and was yellow in colour. This, however, was not due to sewage pollution, but was caused by iron gaining access to the water from a manufactory which drained into it. I understand that measures are to be taken to treat this Chemical waste and to prevent the discolouration caused.
93. Work was also undertaken during the latter part of the year for dealing with part of the sewage of Coleshill by irrigation, and the result here I hope will prove to be satisfactory. At the same time it must not be forgotten that the sewage from the northern half of the town is still discharged in a crude state into the River Cole by two pipes, and that I believe 1,400 people are discharging their sewage in this way; it is incumbent, therefore, on the Meriden District Council to take early steps to prevent this serious pollution.

94. The River Blythe is chiefly affected by small communities. Up till recently part of the sewage of Coleshill discharged into it, but this is now taken out. Part of the sewage of Solihull and Knowle, after treatment on land, passes into it, and at times the effluents have not been satisfactory, the attention of the Solihull District Council being called to the fact. It must not be forgotten that a scheme costing over £40,000 is being developed for sewerage and erecting Works for sewage disposal for these Districts, and that good progress has been made during the year, but that the Works are not yet completed, so that the nuisance they are intended to remedy has not been removed. During the course of the present year I have hopes that the conditions will be much improved.
95. The Works at Olton have been inspected during the year and were found unsatisfactory, and as a result the Surveyor re-drained both the east and the west divisions of the irrigation area. The work was only completed towards the end of the year. I hope to be able to report in the future an improvement in the results produced on this sewage area.
96. As regards Fillongley, it will be remembered that the scheme suggested to the Local Government Board for dealing with the sewage of this village was objected to on certain grounds, and up to the end of the year no new scheme had been brought forward. This matter I consider distinctly urgent.
97. The Anker, though not a large River, is a very important one from the point of view of sewage disposal, and I think it may be satisfactory to the Council County to know that it undoubtedly leaves our County rather better than it comes to us. Before it reaches Warwickshire by means of a Brook, it receives the discharge of the effluent from the Leicestershire town of Hinckley. This effluent has never been satisfactory. At times it has produced considerable pollution, and very much care and attention has been given of late by the District Council to deal with the sewage, but the result up to the present cannot be considered satisfactory. The method of treating the sewage is by sedimentation in tanks and irrigation on land. Double filtration through land is now being adopted. Undoubtedly the land is very ill suited for the purpose of sewage disposal, and the whole question is complicated by the large amount of trade effluent coming from the Sketehley Dye Works. I am quite sure that the Hinckley Urban District Council are very earnest in their endeavours to produce a better result, but although I have been in consultation with the County Medical Officer of Health of Leicestershire, as well as with the Surveyor of the District Council, I am not sanguine that without considerable alteration the effluent is likely to be good enough to come into a small River like the Anker. The River is being kept under observation as frequently as other work will allow.
98. It is with great pleasure that I can call attention to the excellent work being done by the Borough of Nuneaton in dealing with their sewage. During the year 1910, much was being done to modernise their present works, though they are only about nine years old. The effluent produced by Nuneaton has, speaking generally, always been satisfactory, but it is a rapidly growing town, and it became evident that something would have to be done to improve the old contact beds, if good results were to be maintained, and I am pleased to be able to state that there has been a conversion of several of these beds during the year into bacterial filters with mechanical distributors, with the very best results. I have no complaint whatever of the final effluent discharged by Nuneaton.

99. As regards Bedworth and Foleshill, I am not at all satisfied with the effluents produced. Improvement has undoubtedly been effected during the year at Foleshill, owing to the fact that the three percolating filters have been dealt with by having about 9 inches of clinker placed on the surface, and this has produced a much better result. At Bedworth, however, the Works when last inspected during the year, were not producing a good result. The irrigation area on which the effluent goes after filtration, appears considerably over-burdened, and a sample taken showed a marked odour (which developed on incubation) and a very insufficient amount of purification.
100. Atherstone Sewage Works has produced a fairly good result, but cannot be considered completely satisfactory, and it is to be hoped that measures will be taken before long to improve the conditions.
101. I am pleased to be able to report that the work at Polesworth in laying down the new Works was continued during the year, and at the present time the sewage is being treated which previously ran into the River in a crude state.
102. The Bacterial Works at Hatton Asylum have produced an excellent effluent continuously during the year and no nuisance has been caused, either by pollution of the effluent or by effluvia arising from the Works.
103. It will be seen that a very large amount of work has been done in connection with sewage disposal and the prevention of pollution. In the future even more will be done, and many of the River pollutions which hitherto have escaped attention, and which though small in themselves may be serious in the general effect produced, will be dealt with as time allows.
104. I called attention last year to the importance of improved management of existing Works. I am pleased to see what I said has been well received and good result have been achieved by good management at many of the Works about which I had to complain in the past.

ELEMENTARY SCHOOLS.

105. There can be no doubt whatever that the Elementary Schools have a very important bearing on the public health, for although from the County point of view health work begins with the infant, yet it is in the School that the first individual ideas are formed and the sanitary conscience first brought into being.
106. The condition of the Elementary Schools themselves, as regards sanitation and ventilation, comes now directly under the Education Committee, and I may say here in passing, that very much work of an excellent kind has been done in causing improvements to be carried out, not only in Council, but in Non-Provided Schools.
107. I have made arrangements by means of which very full information is given to me as to the presence of cases of notifiable infectious and other diseases in the Schools. Forms are furnished to the School teachers and the School Attendance Officers, who notify me of cases or suspected cases coming to their knowledge, and by this means I, as County Medical Officer of Health, get a very good idea as to the state of the County as regards infectious diseases.
108. The arrangements I referred to as just coming into being in my last Report, whereby District Medical Officers of Health take part in the sanitary work of the Schools as regards notifiable infectious disease, has on the whole worked well.

109. During the year 73 Schools were closed owing to the prevalence of infectious diseases, a large proportion of them, as in the past, being closed on account of Measles. I am pleased that this sanitary proceeding, as a result of our Conference, is now carried out on much better lines, more in accord with practical experience.
110. Full details of the condition of each School as regards structure, play-ground, heating, light, and sanitation, have already been supplied to the Education Committee.

VACCINATION.

111. The table in the Appendix referring to the vaccination of children is, I am sorry to say, a somewhat melancholy document. It is a melancholy document in the sense that the figures in the totals column show that nearly one half of the children born during the period to which it refers in the County, were not vaccinated, and that while 5,547 children were vaccinated, Conscientious Objection Certificates were actually obtained in the case of 3,076. Happily this state of affairs is not equalised throughout the County. I say happily because when the day of reckoning comes it may be hoped that certain Districts will reap the reward of their intelligence. In Aston Manor for instance, out of 1,990 births registered, only 53 certificates of conscientious objection were obtained, while in Nuneaton, out of 1,199 births, 800 were obtained. Rugby Urban is almost as bad, for while 69 cases only were successfully vaccinated, 295 Certificates were issued. In Foleshill, too, while 236 children were vaccinated, 375 certificates were obtained. These results are undoubtedly due to the ease with which so called conscientious objection Certificates are obtained. Under the modern system, some people might almost think that a suggestion was implied as to the desirability of not having an infant vaccinated.
112. Looking at the condition of vaccination in the County, I am compelled to wonder whether in the interests of vaccination and in the future interests of the people themselves, it would not be better for the present Vaccination Law to be withdrawn altogether. At the present time, though nominally compulsory, vaccination is really optional, and when, as it must do in the future, the present system of administration breaks down in that protection of the community as a whole will become so incomplete, there is a considerable danger that the failure will be alleged to be due to vaccination rather than to a condition of affairs produced by a half-hearted carrying out of compulsory measures.
113. That vaccination will, if properly carried out, practically without any risk prevent Smallpox, has not only been proved to the satisfaction of many Royal Commissions, but is shown as an object lesson in Germany, where not only practically is there no Smallpox, but owing to the protection afforded by vaccination, there are no Smallpox Hospitals with all their attendant burden on the rates.

REFUSE DISPOSAL, SCAVENGING, ETC.

114. Every year, owing to education both general and special, the public becomes more aware of the importance of cleanliness in the surroundings of dwellings, and there can be little doubt that the public conscience is becoming much more sensitive as regards the duty of removing waste and possibly putrefactive matters from near dwellings. As a consequence of this, there is a gradual appreciation developing on the benefits of the early removal of waste matters from houses. In certain Districts of the County this is excellently carried out. In Erdington for instance, I can express my cordial appreciation of the way in which household dust is removed. In

certain other Districts, however, the work is not so efficiently done, and I recorded in my Report for last year that a commencement had been made in the Borough of Sutton Coldfield in the way of public scavenging. I regret to have to state that though things are improved compared with the older condition, the matter is not yet put on a modern sanitary basis. In other words, scavenging of premises is not carried out regularly at comparatively short periods, with the consequence that many letters are sent to the local officers complaining of the non-removal of waste matters. Since the Report of the Medical Officer was published, a Committee has been appointed to report on this matter, and there is reason to believe that as a result an improved system of regular scavenging will be inaugurated at an early date.

115. In Atherstone I find from the Report of the Medical Officer that public scavenging is carried out by the Council in three parishes, in all of which it has been done in a satisfactory manner with the exception of Atherstone, in which the contractor was fined ten shillings for his negligence in the weekly removal of refuse at premises where portable bins are provided. The Report further says:—"The question of public scavenging in the parish of Baddesley has been before the Council owing to the nuisance caused by ashes and house refuse being deposited on all parts of the common. The Lords of the Manor, however, have granted the use of two large holes on the common, as a "tip" for the disposal of ashes, and Notice Boards have been erected, warning persons against placing such refuse other than in the places provided, which I hope will in future be the means of preventing any nuisance." The Inspector also states that the provision of portable bins has been steadily proceeded with in those parishes where public scavenging is carried out, ensuring the prompt and regular removal of house refuse. I cannot refrain from touching on this very important point. In Urban Districts particularly it is very desirable to do everything possible to improve the methods of collection and the provision by the District Council of suitable galvanized bins to small houses is in my opinion not only very desirable in the sanitary sense, but economical also from the point of view of the Ratepayer, in that it allows of cheaper and readier means of collection and dealing with the refuse.

116. As regards Foleshill District, the Inspector in his Report states:—

"As in previous years, the Scavenging of the Parishes of Bedworth and Foleshill has been carried out by contract. During the period under review, a matter, also, which I complained about in my last Report, viz., the Scavenging Scheme for the Parish of Exhall, has received the attention of the Council, and a contractor is now appointed, under my supervision, to carry out this work.

"With regard to the Parishes of Foleshill and Bedworth, several complaints have been received during the year. In Bedworth, the complaints have arisen, not through the neglect in emptying the ashpits and privies, which are now rapidly becoming a thing of the past, but the irregular way in which the ashbins are emptied, and, in Foleshill, with regard to the carelessness of the contractor. With respect to the parish of Exhall, I consider, during the short period the contract has been in operation, the work has been satisfactorily carried out.

"Owing to the large additional number of dry ashbins which have been provided in Foleshill and Bedworth during the year, the removal and disposal of this refuse has become a very serious question, and is likely to prove itself more so in view of the very rapid developments of these districts."

“Another point which materially adds to this difficulty is the fact that, in these Parishes, a large portion of the population consists of miners, who receive certain amounts of coal from the various pits, as a portion of their earnings. Consequently, they are not so careful as they otherwise would be if they had to purchase their coal; with the result that, unless the emptying of the ashbins is carried out with the strictest regularity, a nuisance arises from their overflowing, and heaps of ashes having to be placed anywhere at the backs of the premises.”

117. Taken in conjunction with the deficiencies at Atherstone, this Report points to the desirability of the work being done where it is possible by the Council. It is obvious of course that the Contractor is anxious that his contract shall pay, but my idea of undertaking scavenging is that the health of those in the neighbourhood should not be jeopardized under these conditions, therefore it is not easy to reconcile the two different positions, and experience has shown me that scavenging by contract rarely if ever continues for a long period without difficulty.

118. Another point which must not be lost sight of is the effect of improved scavenging on the production of flies. Flies find their breeding place in collections of manure, dust and garbage. The fly used to be looked upon as an irritating nuisance, but experiments and pathological research have now shown it to be a sanitary danger. Flies settle on dust and dirt, putrefactive and sometimes infected, and are apt under certain conditions to carry this and deposit it on food improperly stored, as it so frequently is, therefore scavenging is not only a matter of decency and comfort, but of health, and it is necessary that District Councils should look upon the matter in this way.

119. Closely connected with this question is that of the provision of closets. In populous places no midden privies should ever be found. I am pleased to be able to state that this is a proposition now becoming more or less generally accepted in the County. The Reports bear evidence in considerable numbers to the fact that these old-fashioned appliances are gradually giving way to the less objectionable pan privy, or more modern sanitary water closet.

120. The Medical Officer for the Mid-Warwickshire Combined District, states that in the Urban District of Kenilworth especially, active steps have been taken to enforce the provision of properly flushed closets in place of defective water-closets and privies. He refers also to the good arrangements made in the Urban Districts, and also at Knowle, Solihull, and New and Old Bilton, and Wolston. Referring to Southam, he says:—

“The town of Southam presents special difficulties in this respect. The absence of a public water supply, and the want of a complete sewerage system, render the dry method of disposal an unfortunate necessity. The gardens and courts at the backs of the majority of the cottages are not sufficient for the disposal by burying of the contents of the privies, and there is no public tip for this purpose. The result is, that on the one hand the soil of the gardens and courts is permeated with filth, and on the other hand it is practically impossible for the Sanitary Inspector to get the cottagers to empty the privies regularly. Though this state of affairs obtains in many parts of the town, it is most evident on Tattle Bank, where there are two small rows of cottages on each side of a comparatively enclosed space. In consequence of the occurrence of a case of Typhoid Fever on this Bank, I made a careful inspection in October, and found the space between the cottages in a most unsanitary state. The filth and garbage, together with the manure from numerous pig-sties was simply put into open holes dug in the

ground. The privies were dilapidated and filthy. In fact, I considered that there was undoubtedly a connection between the insanitary state of the Bank and the special incidence of infectious disease in that particular group of cottages. During the eleven years from January 1900, to December, 1910, the following cases of infectious disease have been notified from this spot:—20 of scarlet fever, 9 of typhoid fever, 2 of erysipelas, and 1 each of continued fever and small-pox.

“I therefore recommended to the Southam Rural District Council that steps should be at once taken to enforce the provision of proper privy and ash-pit accommodation, and that the sties and accumulations of filth should be ordered to be removed. I also urged the consideration of a public scavenging system for the town.

“A committee has been appointed to consider the details of a scavenging scheme, and the Council have passed a resolution in support of the desirability of such a scheme for Southam. Up to the present time the nuisance on Tattle Bank remains unabated.”

121. As regards the Borough of Nuneaton, the Medical Officer of Health states that there are still 1,073 privies with fixed receptacles, and two with moveable receptacles, and that during the year 116 privies have been converted into water closets. He further states:—“In these days of advanced sanitation, and in a growing and important Borough like this, the existence of so large a number of ashpit privies is, in my opinion, especially in the more densely populated areas, a menace to the health of the community, and no effort will be spared to gradually reduce the number.” The refuse removal here is done by Local Authority weekly. It is carted to the Council’s Destructor, where it is burnt.

122. The only other point in connection with this, is the importance of dealing with the refuse when collected in Urban Districts such as Leamington, Nuneaton, etc. The only proper method is to burn the refuse in the Urban Districts. Speaking generally of the Rural Districts, it may until they become very populous, be dealt with on tips, if such be available remote from dwellings. In parts of Rural Districts, however, as they become populous, nuisance is apt to result, owing not only to the collection of refuse, but to the fact that flies are bred, and the whole tip becomes the dwelling place of very large numbers of rats. These alone are not only a nuisance but are apt to be a source of great damage, and also to act as carriers of at least one type of infectious disease.

INSPECTORS’ REPORTS.

123. I have received from the Inspectors in the County tabular statements of the work done by them, on a form drawn up by me. This form is not used because it is imagined to be the best possible, but because it is one suitable for Districts of all kinds, so that a tabulation of the work done in the County as a whole may be properly made. I regret, however, to state that the Inspector of the Bulkington Urban District refuses to supply me with the information on the ground that he is not paid for the work. This gives point to an objection often raised by workers in public health matters, to the undesirability of making small districts, the population of which is only reckoned in hundreds. The officers cannot receive a proper salary, giving only a portion of their time to the work, and administration must of necessity be less efficient than in the case of Districts properly Officered. Under the Housing and Town Planning Act, the County Medical Officer has power to obtain information in certain particulars, and I shall have to consider in the future, what measures I must take to get the information to which I am entitled under the Act.

HOUSES AND BUILDINGS.

124. The Housing and Town Planning Act has been in operation during the whole of the year, but as far as I can gather from the Reports, except in a few instances little has been systematically done and but few representations have been made. These include:—Borough of Nuneaton 11, Mid-Warwickshire Combined District 3, Sutton Coldfield 1, Brailes 1, Farnborough 1. This is not altogether to be wondered at when we consider that the Regulations under Section 17, Sub-Section 1, of the Housing and Town Planning Act, 1909, were not issued by the President of the Local Government Board until September 2nd, and it was quite fair—as urged by some of the District Councils—to say that they were waiting for these. These regulations are distinct and definite, and point out the duties of the Authorities in the plainest possible way. They are as follows:—

ARTICLE I.—(1) The Local Authority shall as early as practicable after the date of this Order take into consideration the provisions of sub-section (1) of Section 17 of the Act of 1909, and shall determine the procedure to be adopted under these Regulations, to give effect to the requirements of that sub-section in regard to the inspection of their district from time to time.

(2) The Local Authority shall as part of their procedure make provision for a thorough inspection to be carried out from time to time according to the varying needs or circumstances of the dwelling-houses or localities in the district of the local authority.

(3) The local authority shall cause to be prepared from time to time by the Medical Officer of Health, or by an Officer designated by them but acting under his direction and supervision, a list or lists of dwelling-houses the early inspection of which is, in the opinion of the Medical Officer of Health, desirable. The list or lists may, if thought fit, relate to the dwelling-houses within a defined area of the district without specifying each house separately therein.

ARTICLE II.—The inspection under and for the purposes of sub-section (1) of Section 17 of the Act of 1909 shall be made by the Medical Officer of Health, or by an Officer designated by the local authority but acting under his direction and supervision, and the Officer making inspection of any dwelling-house shall examine the state of the dwelling-house in relation to the following matters, namely:—

- (1) The arrangements for preventing the contamination of the water supply.
- (2) Closet accommodation.
- (3) Drainage.
- (4) The condition of the dwelling-house in regard to light, the free circulation of air, dampness, and cleanliness.
- (5) The paving, drainage, and sanitary condition of any yard or out-houses belonging to or occupied with the dwelling-house.
- (6) The arrangements for the deposit of refuse and ashes.
- (7) The existence of any room which would in pursuance of sub-section (7) of Section 17 of the Act of 1909 be a dwelling-house so dangerous or injurious to health as to be unfit for human habitation.
- (8) Any defects in other matters which may tend to render the dwelling-house dangerous or injurious to the health of an inhabitant.

ARTICLE III.—Records of the inspection of dwelling-houses made under and for the purposes of sub-section (1) of Section 17 of the Act of 1909 shall be prepared under the direction and supervision of the Medical Officer of Health, and shall be kept by the Officer of the local authority making the inspection or by some other Officer appointed or employed for the purpose by the local authority.

The records may be kept in a book or books or on separate sheets or cards, and shall contain information, under appropriate headings, as to:—

1. The situation of the dwelling house, and its name or number.
2. The name of the Officer who made the inspection,
3. The date when the dwelling-house was inspected,
4. The date of the last previous inspection and a reference to the record thereof,
5. The state of the dwelling-house in regard to each of the matters referred to in Article II. of these Regulations,
6. Any action taken by the Medical Officer of Health, or other Officer of the local authority, either independently or on the directions of the local authority,
7. The result of any actions so taken,
8. Any further action which should be taken in respect of the dwelling-house.

ARTICLE IV.—The local authority shall, as far as may be necessary, take into consideration at each of their ordinary meetings the records kept in pursuance of Article III. of these Regulations, and shall give all such directions and take all such action within their powers as may be necessary or desirable in regard to any dwelling-house to which the records relate, and a note of any directions so given and the result of any action taken shall be added to the records.

ARTICLE V.—The Medical Officer of Health shall include in his Annual Report information and particulars in tabular form in regard to the number of dwelling-houses inspected under and for the purposes of Section 17 of the Act of 1909, the number of dwelling-houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation, the number of representations made to the local authority with a view to the making of closing orders, the number of closing orders made, the number of dwelling-houses the defects in which were remedied without the making of closing orders, the number of dwelling-houses which, after the making of closing orders, were put into a fit state for human habitation, and the general character of the defects found to exist. He shall also include any other information and particulars which he may consider desirable in regard to the work of inspection under the said Section.

ARTICLE VI.—The Medical Officer of Health and any other Officer of the local authority shall observe and execute all lawful orders and directions of the local authority in regard to or incidental to the inspection of the district of the local authority under and for the purposes of Section 17 of the Act of 1909, and the execution of these Regulations.

ARTICLE VII.—In these Regulations “the Act of 1909” means the Housing, Town Planning, etc. Act, 1909.

ARTICLE VIII.—These Regulations may be cited as the Housing (Inspection of District) Regulations, 1910.

125. It will be seen that in the future every Local Authority shall determine the procedure to be adopted to give effect to the requirements under Sub-Section 1, Section 17. They must make provision for a thorough inspection of the dwelling-houses or localities in the District of the Local Authority. They shall appoint an Officer, either the Medical Officer of Health or another, to make this inspection. They define the points to which attention shall be given. They decide that records shall be kept in books, or on separate sheets or cards, and shall contain information under proper headings, referring to the general conditions observed and the result of any action taken. Article 4 gives to each Local Authority the duty of taking into consideration at each of their ordinary meetings the records kept in pursuance of article 3 and of these Regulations, while the Medical Officer of Health is to include in his annual report, information and particulars in tabular form, as to the work done under the Act and Regulations.

126. It is obvious that as the County Council is given particular powers under this new Act, and the County Medical Officer of Health has also given to him a distinct and definite status, in the future it will be necessary for the Medical Officer of Health to give information on the form required by the County Council, and it seems to me that this might well be considered an important item in the programme of the Conference of Sanitary Authorities with the County Health Authorities, which will, I trust, again take place in the Autumn.

127. Suffice it to say that what little has been done this year has shown the importance of the work, because it would be a generally accepted proposition that the condition of dwelling and general environment of the individual has an important bearing on the very large and complex problem of public health.

BYE LAWS.

128. During the year 1910, I hoped to be able to go into the question of the existing Bye Laws for building and other sanitary purposes throughout the County as a whole. The enormous increase in routine work, and the fact that my staff has been so fully occupied, has prevented me doing this. I know that in the majority of Districts Bye Laws are in operation for the majority of sanitary purposes, and, speaking generally, these are fairly satisfactory. In the large and populous District of Tamworth, however, I am sorry to be able to state that matters still remain in the unsatisfactory condition referred to during the last few years. As early as January 24th a Committee met and settled the form of Bye Laws to be submitted to the Local Government Board. These were returned with the request that certain formalities should be complied with. Dr. Fausset says:—"The draft model Bye Laws have not yet been settled by your Committee, but are still under consideration." I feel that there would be a neglect of duty on my part were I not to call your special attention to this. Tamworth is a very rapidly developing District, and it is in the highest degree important that its development should take place under modern sanitary auspices. The Bye Laws, therefore, should be settled as early as possible, and I cannot help feeling that they would have been settled a long time ago had the desire for a settlement been a real one. I am making enquiries at the present time as to the state of affairs throughout the County as regards bye-laws.

WATER SUPPLY.

126. The majority of the Reports give evidence of the work done in providing proper supplies of water for the residents of the Districts. In Aston, Erdington and Sutton Coldfield, nearly all the inhabitants are supplied with water from the mains. In the two former instances from the mains of the Corporation of the City of Birmingham,

and in the case of Sutton Coldfield, from those of the South Staffordshire Water Company. In Leamington, Nuneaton, Stratford-on-Avon, Rugby, and Kenilworth particularly, water supplies are also good in quantity and satisfactory in quality. In many parts of the Rural Districts the same thing may be said, and in other Rural Districts where Public Water supplies are not available, the District Officers appear to have been doing good work in supervising both the quantity and quality of well and spring water used under existing conditions.

127. It should not be forgotten that it is the duty of all Sanitary Authorities to see that the residents are supplied with fit and proper water, and also to see that the water from Public Supplies is maintained of sufficiently high quality. Up to a few years ago the only means available for this were inspection of sources and Chemical Analysis. At the present time, however, valuable information can be obtained by Bacterial examinations, and in the case of Public Supplies these should be utilised along with chemical examinations at periods of not longer than every three months. If this had been done in the past many of the serious epidemics of Typhoid Fever would have been prevented, as the history of many of these points to the fact that an unsuspected source of pollution suddenly became operative, producing results properly termed disastrous to local interests. Details of extension of mains, and the substitution of good water for bad, will be found in the Summaries appended hereto.

127. I cannot help calling attention to one point which seems to me of considerable importance, namely, the difficulty of getting a supply from a Water Company in newly developing Districts. The Companies, as a rule, although given statutory power, object to lay mains unless they can at once see that the outlay will be profitable, and I know of many instances where bad water is continually used because Water Companies, without a grant of a considerable sum of money, object to bring their water within a reasonable distance of the persons requiring it. It seems to me, therefore, that in cases where the Public Water supply is in the hands of a private company, there should be a means to compel them in the public interest, to supply water under the conditions I have referred to. Parliament gives them statutory powers, and in the interests of public health, Companies should be required to take the necessary measures to meet public and sanitary requirements.

BACTERIOLOGICAL EXAMINATIONS.

128. I am pleased to be able to state that in many of the Districts much appreciation has been shown of the facilities afforded by the County Council for bacterial examinations, to confirm or otherwise, cases of Diphtheria and Typhoid Fever. There is nothing to add to what I have said in previous years, except to state that the Assistant Medical Officers have in some instances taken swabs from the throats of children in doubtful cases at School Inspection, and have in many instances found that cases, which would otherwise have escaped detection, have had in the throat virulent bacilli likely to produce Diphtheria in others who are susceptible, and near them.

129. I attach the greatest importance to the use which should be made of bacterial examinations before Diphtheria patients are allowed to return to School. In many of the infectious diseases we have no means of telling whether or not a patient has ceased to be infectious, but in Diphtheria we can almost definitely decide that a patient may safely be allowed to mix with its fellows, if three swabs properly taken, all prove to be negative. This is one of those cases where the close association between the preventive and the curative branches of the profession is becoming more and more evident. The Medical Officer of Health cannot very well deal with each particular patient, but in the present state of science, I cannot conceive how a Medical attendant

can conscientiously certify that a child is safe to return to School, after suffering from Diphtheria, unless he takes advantage—at no cost to him—of the facilities now offered for bacterial examination.

130. I am pleased to be able to report that shortly after the close of the year, the suggestion I made in my last Report was adopted, in that in making a new agreement for bacterial examination with the Pathological Department of the Birmingham University, the County Council has made arrangements for the examination of Sputum in suspected cases of Phthisis.

COWSHEDS, DAIRIES, AND MILKSHOPS.

131. The Milk Bill, which is to do so much for the improvement of the milk supply, is still on the list of promises, though a statement has quite recently been made that its introduction by the President of the Local Government Board will shortly take place.
132. A great deal of work has been done undoubtedly, in improving the condition of existing Cowsheds. In this, as in most other departments of life, more cleanliness is now observed, but in the Hygienic sense I cannot express myself as satisfied at the way in which milk is produced and distributed. We know how readily it becomes a vehicle for the dissemination of disease. We know that this may arise from the cow itself, or from the milkers and distributors, and it is very important therefore that everything should be done that will minimize these chances of disease production. Everything which tends to improvement of the cowshed tends to improve the health of the cows and the workers. In the past, most producers of Milk have been possessed with the idea that Milk could only be properly produced in warm, and consequently badly ventilated cowsheds, for unless artificial heating is maintained, a warm Cowshed must be a badly ventilated one. Experiments have now proved that fresh air accompanied by cold is no bar to the profitable production of Milk, and just as I am convinced that many of the dwellers in our smaller cottages would on the whole be better if windows were removed, so I am convinced that public health would benefit if Cowsheds were altered in type, so that they became only shelters, while at the same time the producer would not suffer financially. I was much struck during the year by finding accidentally, a cowshed in Warwickshire on these lines, that is, the shed is a roof supported by pillars, the sides being open. The cows, I am informed, are maintained in a perfectly healthy manner during the winter, and providing certain elementary precautions are taken, the quantity of milk produced does not suffer.

HEALTH VISITORS.

133. During the year 1910 Health Visiting in Warwickshire underwent another change, in that the Staff was extended from six to ten, and a Superintendent Health Visitor and School Nurse was appointed in the person of Miss Lowe, the senior Health Visitor of the County. Four new Health Visitors were appointed, namely Miss Brown, Miss Houghton, Miss Underwood, and Miss Wheatley.
134. I have received so many requests to give full details of the methods originated by Warwickshire, by means of which the Health Visiting is carried out under County Council auspices, that I propose to occupy a little space in stating the conditions which have been followed, and the present method of dealing with the work which comes within the province of the Health Visitor. At the present time there are ten Health Visitors in the County—one Superintendent and nine Divisional Visitors. Each of these is not only well qualified for the normal duties falling to the Health Visitor, that is, knowledge of infant treatment and domestic management, but each is also a Certified Midwife, and has had experience in School Work. The method I have adopted

is based on the principle that the question of area to be covered is the great crux in County Health Visiting, and that one of the first things done was, as far as possible, to put an end to the over-lapping of various Officers, and thus save time and travelling expenses. There is, however, another important point in the system which has not yet received the attention which it deserves and demands. I refer to the over inspection of the houses and persons of the working classes. At the present time, too much inspection, though well intentioned, is certain to ensure resentment. I sympathise to a very large extent with the objection of many people to the inspection to which they are possibly subjected. At the present day the Inspector has got to be clothed in too rigorous official garb, and although he or she may perform the functions with tact and discretion, a little opposition at every inspection frequently remains behind. By the system I have introduced, the County is divided into nine Divisions. In each of these I have a woman Health Visitor who is also School Nurse and Inspector of Midwives. I have thus endeavoured, with, I hope, a measure of success, to overcome the difficulties of too much inspection of the public and waste of time of the Officers. At the same time I have endeavoured to do something in the way of educating the public mind to the fact that Hygiene in its broadest sense is something which begins with the infant and follows the child to School, and still remains afterwards to be dealt with in the house of the individual. The Health Visitors functions begin therefore with the inspection of babies in suitable cases. She enters the house, not as an inspector to disturb the domestic privacy, but as an adviser and friend to the mother of the family. She explains to her as a friend, the fallacies commonly held as to infants' tending and feeding. She advises also on many of the difficult points of domestic management. This of course is the theory, and I am pleased to say that owing to the good work performed by the Health Visitors, in the great majority of instances it has worked satisfactorily in practice.

135. As the Health Visitor is also Inspector of Midwives for her Division, she not only keeps in touch with the infants, but also with the Midwives who in a large number of instances have brought the infants into the world. In this way she gains a further amount of knowledge as to the methods of practice of the Midwives, and is able, where necessary, to correct wrong methods of work, and to stimulate those, who for various reasons are apt to be lax, to a full appreciation of their position and duty.
136. The Health Visitors also in their Divisions act as School Nurses, and they thus keep in touch with the children after they cease to be infants, and at the present time introduce Hygienic methods as far as possible, to those attending School. At the same time they come in contact with the Assistant Medical Officers of Health, and report defects in the houses of the people. They also come in contact with the Local Health Authorities, and thus act as a link between the Administrative Health Work of the Districts and the co-ordinating work of the County Council.
137. It will thus be seen that in Warwickshire we have made a beginning of co-ordinating the Central and District agencies in dealing with Public Health, not in any way reducing the responsibilities of the Local Authorities, but endeavouring to work out as far as possible the problem of Public Health as an entity dealing with the human factor from infancy to old age.
138. To me this part of the County work is of the greatest interest. I naturally believe it to be of the greatest value, and those who have studied our methods, I believe, are in agreement with the proposition, I have pushed the work as I have done because I am convinced that one great point which all workers in State Hygiene have to strive for at the present time is the education of the public in matters of

their Sanitary well being, and the production as far as possible of what for the want of a better term I would call the Sanitary conscience.

139. By referring to Table J in the Appendix, it will be seen that no less than 8,400 visits were made, 1,208 to infants, 702 to Midwives, and 4,740 to School Children, while in addition, 1,626 other visits were made, 23 Health Talks given to children in the Schools, and 3 Lectures to Midwives.

METEOROLOGY.

140. As in previous years, I am able to append to the Report Tables dealing with Meteorological Observations taken at Sutton Coldfield and Leamington respectively. Referring to rainfall, we again notice that this was highest in the north of the County, for while the amount registered at Sutton Coldfield was 30·7 inches, at Leamington it was only 27·0 inches. It will be seen, however, that the number of rainy days was less in the north than in the south, a similar observation being made in the previous year. The highest rainfall in Sutton was in December, 5·04 inches being registered, in Leamington, however, the fall was only 3·75 inches. March and September were both dry months, less than an inch of rain fell both in the north and the south of the County. As regards temperatures, the mean temperature for the north was 47·2 degrees, and for the south 49·6 degrees. The highest maximum temperature shown at Leamington was in June, when the temperature reached 80 degrees. In Sutton Coldfield the temperature in the same month reached 81 degrees. The lowest temperature reported was 9·5 in the north on the 27th January, but at Leamington the temperature only fell to 17 degrees on the same day. There are no records of sunshine in the Leamington Report, but the number of hours registered at Sutton Coldfield was 1,289 hours 32 minutes. This compares unfavourably with the previous year, when 1,335 hours 3 minutes were registered, and it must be borne in mind that this was not at all a fine year, so that the outstanding meteorological features of the year were the somewhat excessive rainfall, low maximum temperature, and deficiency of bright sunshine. These conditions are those that make for health. I said in my last year's Report:—"The low temperature generally experienced, and the large rainfall account in some measure for the very excellent Vital Statistics recorded during the year." Much more so was this the case in 1910, and to a very large extent our very excellent Vital Statistics must be attributed to this fact.

ADULTERATION.

141. The number of samples taken in the Administrative County during the year was 847, compared with 772 and 740 in the two previous years. In my opinion this number is quite satisfactory. Sixty-one of these proved to be adulterated, giving a percentage of articles adulterated to those submitted of 7·2, a percentage almost identical with that of the previous year.
142. Nearly all the samples were taken by the Inspectors of Weights and Measures appointed for this work by the County Council, and this is as it should be, but a few samples were submitted as of late by Messrs. Parsons & Withers, the Sanitary Inspectors for the Rugby Urban and Rural Districts respectively.
143. Nothing particularly striking occurred under this head during the year. A reference may perhaps be made to the arrangement by means of which the carrying out of the Sale of Food and Drugs Acts is left in the hands of the County Medical Officer of Health, as regards the whole of its administration. The effect of several years' work has been to prove that the results obtained are very satisfactory, and that this method of working the Act produces a minimum of friction and a maximum of advantage to the public interest.

144. Several samples of Rice have been submitted but in no case was there an amount of faeing observed exceeding the suggested permissible standard of the Chief Food Inspector to the Local Government Board.
145. A large proportion of the samples were taken "Informally" in the first instance, and much information thus obtained as to the nature of the food sold.

FACTORY AND WORKSHOPS ACT, 1901.

146. In praectically all the Reports of the District Medical Officers of Health, tables are included showing the results of the Inspection of Factories and Workshops. On the whole, these Reports I find to be quite satisfactory, showing that matters of ventilation, eleanliness and overerowding are receiving attention. In a County such as Warwickshire, most of the workshops are small and to a large extent open, and therefore the question of eleanliness is the ehief point to be observed. It is very important that the necessary steps should be taken to provide proper conveniencess for workers of different sexes when these are employed together.

MIDWIVES ACT, 1902.

147. In no year since the Act has been in operation has such important work been carried out as in 1910. The reason for this is the increased number of Inspectors of Midwives, the smaller area to be ecovered by the Inspectors and the greater power each of these therefore has had in keeping the work of the Midwives in her District under close observation.
148. Six hundred and Twenty-six visits were made altogether, and as a result of these it has been found that the total number of Midwives in praetice within the Administrative Area is 377. Of these, only 103 have been properly trained, the remainder having been registered owing to the faet that they could prove they were in praetice at the date named in the Act.
148. The Inspectors report to me that there is now a much improved standard of work, and partiularly is this to be noted in the eleanliness of the women and of their applianees. On one or two oecasions during the year I have myself inspected the kits of considerable numbers of Midwives and I have been gratified to find that in the majority of instances the Midwives now appreciate the importance of eleanliness. In faet I was much struck by the exeellent condition in which the lining of the bags and the applianees were kept.
149. In several instances the Inspectors have taken the opportunity of attending at confinements and observing the mode of praetice of the Midwife. No resentment has been eaused by this, owing to the taet and eare utilized, but much important information has been obtained.
150. Very few diffieulties have been reported to me in eonnction with the working of the Act. I have no reecord of any serious diffieulty in obtaining Medical help, and except in very few instances, the neecessary reecords of sending for Medical help, and of notifying Stillbirths, have been promptly and properly supplied.
151. In all eases of notices of Stillbirths, both the Midwife and the mother are visited as soon as possible, and eareful enquiry made as to the possible cause of the Stillbirth.
152. The Higher Education Committee again set aside £150 for Seholarships for training Midwives, and several applications were made for graunts by Nursing Assoeciations.

154. I am of opinion that though a considerable number of the old type of Midwives have ceased to practice that there is nothing in the way of a general shortage of Midwives in the County. No doubt in one or two Rural Districts there is a little difficulty, but the number of such cases is small, and I do not think that any special measures are necessary more than those in force, to deal with this matter.
155. Nine cases of Puerperal Fever were notified in the practice of Midwives. In each of these cases a confidential Report was received from the District Medical Officer of Health as to the probable causes of the case, while at the same time, the work of disinfecting the Midwife's house and clothes was undertaken by the Local Sanitary Authority.
156. The following notifications were received during the year:—Stillbirth 100, Death of Mother or Child 10, sending for Medical Aid 181.
157. During the year fourteen Midwives resigned and five died. One was removed from the Roll by the Central Midwives Board after application by the Local Supervising Authority, because she continually evaded inspection and failed to notify her change of address, the result being that for some months we were unable to discover her whereabouts.

ORDERS AND MEMORANDUMS ISSUED BY THE LOCAL GOVERNMENT BOARD

158. During the year many important Orders have been issued, but from the point of view of the County Council the most important undoubtedly was one dated July 29th, signed by the President of the Local Government Board, prescribing the duties of every Medical Officer of Health in the Counties, other than the Administrative County of London. These are so important, both to the County Council and its Officers, as well as to the District Councils and their Officers, that I think they should be set out in full. They are as follows:—

To the County Council of every Administrative County in England and Wales other than London;—

And to all others whom it may concern.

WHEREAS it is enacted by sub-section (2) of Section 68 of the Housing, Town Planning, etc., Act, 1909 (herein-after referred to as "the Act of 1909"), that the duties of a Medical Officer of Health of a County shall be such duties as may be prescribed by General Order of the Local Government Board and such other duties as may be assigned to him by the County Council;

And whereas by virtue of Section 70 of the Act of 1909 the above cited sub-section does not apply to the Administrative County of London:

NOW THEREFORE, We, the Local Government Board, in pursuance of the powers given to us in that behalf, by this Order Prescribe the following duties as the duties of every Medical Officer of Health of a County other than the Administrative County of London; that is to say:—

- (1) The Medical Officer of Health of the County shall inform himself as far as practicable respecting all influences affecting or threatening to affect injuriously the public health in the County. For this purpose he shall visit the several County districts in the County as occasion may require, giving to the Medical Officer of Health of each County district prior notice of his visit, so far as this may be practicable.

- (2) The Medical Officer of Health of the County shall from time to time inquire into and report upon the hospital accommodation available for the isolation of cases occurring in the County—
 - (a) of small-pox, and
 - (b) of other infectious diseases,
 and upon any need for the provision of further hospital accommodation.
- (3) The Medical Officer of Health of the County shall communicate to the Medical Officer of Health of a County district within the County any information which he may possess as to any danger to health threatening that district.
- (4) The Medical Officer of Health of the County shall consult with the Medical Officers of Health of County districts within the County whenever the circumstances may render this desirable.
- (5) If the annual or special reports of the Medical Officer of Health of a County district in the County shall not contain adequate information in regard to
 - (a) the vital statistics of the district,
 - (b) the sanitary circumstances and administration of the district, and
 - (c) the action taken in the district for putting in force the provisions of the Housing of the Working Classes Acts, 1890 to 1909,
 the Medical Officer of Health of the County shall obtain from the Medical Officer of Health of the County District such further information on those matters as the circumstances may demand.
- (6) The Medical Officer of Health of the County shall, when directed by Us, or by the County Council, or as occasion may require, make a Special Report to the County Council on any matter appertaining to his duties under this Order.
- (7) The Medical Officer of Health of the County shall as soon as practicable after the 31st day of December in each year make an annual report to the County Council up to the end of December on the sanitary circumstances, the sanitary administration and the vital statistics of the County.

In addition to any other matters upon which the Medical Officer of Health may consider it desirable to report, his Annual Report shall contain the following sections:—

- (a) A digest of all annual and special reports made by the Medical Officers of Health of all County Districts within the County;
- (b) a section as to the isolation hospital accommodation available for each County district and as to the steps which should be taken to remedy any deficiencies which may exist;
- (c) a section on the administration of the Housing of the Working Classes Acts, 1890 to 1909, within the County;
- (d) a section on the water supply of the several County districts within the County;
- (e) a section on the pollution of streams within the County and as to the steps for the prevention of pollution taken:—
 - (i) by the local authorities, and
 - (ii) by the County Council;

- (f) a section on the administration within the County of the Midwives Act, 1902; and
 - (g) a section on the administration of the Sale of Food and Drugs Acts, 1875 to 1907, within that part of the County in which the County Council have jurisdiction for the purposes of those Acts.
- (8) The Medical Officer of Health of the County shall send to Us two copies of his Annual Report and two copies of any Special Report; he shall also send one copy of his Annual Report to the Council of every County District in the County and shall send three copies of any Special Report to the Council of every such County district affected by the Special Report.

This Order may be cited as the County Medical Officers of Health (Duties) Order, 1910.

Given under the Seal of Office of the Local Government Board, this Twenty-ninth day of July, in the year One thousand nine hundred and ten.

JOHN BURNS, *President*.

159. It will be seen that the administration of Sanitary matters in the County has for many years included all the points in the Order, and this must be extremely satisfactory to the Public Health Committee.
160. Another Order of much importance was one issued on the 13th December to the Councils of the several Municipal Boroughs and other Urban Districts and the Rural Districts of England and Wales, dealing with the appointment, tenure of office, salary and duties of every Medical Officer of Health or Inspector of Nuisances, one half of whose salary is intended to be paid by the County Council. The effect of this is to give a greater security of tenure to the local Officers. The duties of District Medical Officers of Health have also been revised and it has become a definite duty for the District Medical Officer of Health to notify all cases of infectious disease received by him during the week, to the Local Government Board and to the County Medical Officer of Health.
161. Another important Order issued in August was one authorising the free provision of Diphtheria Anti-toxin by all District Councils.
162. In September an Order was issued to the several Local Authorities in England and Wales, under the Housing and Town Planning Act, 1909, regulating the procedure and scheduling the type of examination of houses and the records to be kept. An important Article from the County Council point of view is No. 5, which directs the Medical Officer of Health to include in his Annual Report information and particulars in tabular form in regard to the number of dwelling-houses inspected under and for the purposes of Section 17 of the Act of 1909. It will be very desirable that these forms to be kept in a similar way so that they may be readily summarised from the Reports at the end of the year.
163. On the 12th November, 1910, a Memorandum was issued by the Local Government Board's Medical Officer on the subject of Plague, together with Directions for obtaining and forwarding for bacteriological examination material from suspected Plague cases, while on the 19th December a Circular was addressed to the Clerks of County and Borough Councils, referring to the Sale of Food and Drugs Acts, calling attention to the question of Analysts Reports, suggesting the furnishing of information to Sanitary Authorities within the jurisdiction of the County Council of what work has been done.

SPECIAL DEATH RATES.

164. In accordance with my practice in the past, I give below in tabular form figures showing the death-rates from Typhoid Fever, Diphtheria, and Scarlet Fever for the last ten years:—

	Typhoid Fever.	Diphtheria.	Scarlet Fever.
1901.	0·13	0·16	0·11
1902.	0·09	0·12	0·15
1903.	0·04	0·11	0·12
1904.	0·07	0·18	0·10
1905.	0·04	0·14	0·05
1906.	0·07	0·16	0·05
1907.	0·07	0·13	0·05
1908.	0·02	0·17	0·06
1909.	0·03	0·13	0·05
1910.	0·03	0·13	0·10

165. It is with much satisfaction that I call attention to the fact that the figures both for Typhoid Fever and Diphtheria remain at the very low figure recorded in the previous year, while although the figure for Scarlet Fever is higher than of late, this is not surprising when we consider that those of late years have been so remarkably low. A considerable proportion of inflammable material in the shape of children about five years of age, who have heretofore escaped the disease, is calculated to raise the rate when suitable conditions occur. This increase of Scarlet Fever, as I have mentioned in my Report, was not peculiar to Warwickshire, but was observed in many other Towns and Counties in the autumn of last year.

CONCLUSION.

166. In concluding this Report I should like to take the opportunity of congratulating the County residents on the results of the policy of your Committee. The absence of any marked fatality from infectious disease and the fact that the death-rate, zymotic death-rate and rate of infant mortality have reached the lowest level yet recorded, speaks eloquently as to the value of the improved conditions making for health in the County, and although it would be unfair to claim that this satisfactory result is entirely due to Sanitary effort, and not to some extent to physical and meteorological conditions, yet there can be no doubt whatever that as a result of the work carried on, the conditions of life in the County are better than they have ever been before.

167. It is only fitting, too, that I should put on record my indebtedness to the Officers of the various District Councils within our area, for without their ready and willing aid, the labours of my staff and myself would be of comparatively little value.

168. To my own personal Staff, now a considerable one, I am also much indebted, while it is only fair and proper to state that the initiation of the policy which has been so productive of good results, has been due to the appreciation of the value of Sanitation at all times shown by your Committee.

I have the honour to remain,

My Lords and Gentlemen,

Your obedient servant,

A. BOSTOCK HILL, M.Sc., M.D., D.P.H., Camb.,

County Medical Officer of Health.

SUMMARY OF ANNUAL REPORTS OF THE DISTRICT MEDICAL OFFICERS OF HEALTH.

URBAN DISTRICTS.

ASTON MANOR.

169. DR. WHITEHOUSE, in presenting his Report for 1910, states that the sanitary progress of the Borough is most encouraging.
170. He draws attention to the decreased Birth and Death rates and notes a marked decline in the prevalence of Typhoid Fever and Diphtheria.
171. Referring to the question of Infantile Mortality, he hopes that the scheme he has under his consideration of Infant Consultations and Depots for giving advice to mothers may have an active and useful future.
172. The population, as estimated by the Registrar General, is 86,269, but this, Dr. WHITEHOUSE considers, is undoubtedly an over-estimate. Based on the number of occupied houses, with 4.9 as the average number of persons per house, the population would be 79,390, and the Birth and Death Rates calculated on this population would be 25.1 and 11.9 respectively, whereas calculated on the Registrar General's estimate, they are 23.2 and 9.5. Owing to the statistical requirements of the Local Government Board, DR. WHITEHOUSE states that these are the rates recognised throughout his Report.
173. The total number of Births registered was 1998, a still further decline on previous years. The Birth-rate was 23.2 per 1,000, as compared with 23.9 in 1909 and 26.0 in 1908.
174. The total number of Deaths for the Borough was 1,025, giving a Death-rate of 11.9 per 1,000, as compared with 13.9 in 1909. This is indeed a remarkably low Death-rate for a borough with a density of 89.9 per acre.
175. Ninety-nine deaths were registered from the seven principal Zymotic diseases, the Zymotic death-rate being 1.1 per 1,000, compared with 1.7 for the previous year. The average for the last ten years is 2.2 per 1,000.
176. The Infantile Mortality of 109 per 1,000 births registered, shows a continued decline, the average for the last ten years being 150. Referring to this, Dr. WHITEHOUSE says:—"It is a notable fact that since the appointment of Health Visitors five years ago, the Infantile death-rate has decreased 60 to 70 per 1,000 in Aston Manor." He also speaks of the advantages gained by the adoption of the Notification of Births Act, 1907, in enabling the Health Visitor to pay early visits to the homes and give advice to the mother as to the proper feeding and management of the infant.
177. The Report states that 581 cases of infectious disease were notified during the year, including Scarlet Fever 447, Diphtheria 42, Typhoid Fever 26, Membranous Croup 3, Erysipelas 56, Puerperal Fever 7.
179. No deaths were registered from Measles, but Whooping cough accounted for 25, eight of these were in children under one year of age.
180. Included in the Report are copies of leaflets dealing with Measles and Whooping Cough, which are distributed where required to the householders in the Borough.

181. Referring to the Diphtheria and Membranous Croup cases, of which there were 45, DR. WHITEHOUSE says:—"The cases were fairly evenly scattered over the Borough, but the disease was most prevalent in the latter quarter of the year, when 19 of the cases were notified." Continuing on this subject he reports the adoption by the Council of the Diphtheria Anti-toxin (outside London) Order, 1910, a supply of Anti-toxin at the Council House now being available for the use of all Medical men in the District.

182. Referring to Scarlet Fever, DR. WHITEHOUSE says:—"The number of cases of this disease notified during the year 1910 was in excess of that of the previous year, and the virulence of the type in 1910, as indicated by the number of deaths, was greater, especially towards the end of the year."

"During the first quarter of the year 79 notifications were received, during the second quarter 112, the third quarter 120, but during the last quarter there were 136—46 in October, 54 in November, and 36 in December, making the total of 447 cases notified during 1910, as compared with 425 in the preceding year. These 447 cases were mainly of a mild type, and occurred in 346 houses; 366 were removed to the Aston Manor Fever Hospital, representing a percentage of 80 cases isolated. Sixteen deaths occurred among the 447 notified cases, viz., 7 at home and 9 in the hospital.

Referring to the spread of this disease by "carrier" cases, DR. WHITEHOUSE says:—"It is by these mild missed cases or 'carriers' that infection is spread, especially in Schools, although the work done by Medical inspection of school children has done much to reduce one great source of infection."

The Report also deals with the procedure adopted by the Health Department for the prevention of the spread of Scarlet Fever in the Borough.

183. Zymotic Diarrhœa accounted for 47 deaths during the year, a great decrease in the average of the previous ten years, 99. Thirty-two of these deaths occurred in children under one year of age. Referring to the causes of Zymotic Diarrhœa, DR. WHITEHOUSE says:—"I am inclined to the opinion that summer diarrhœa is due to organisms derived from human or animal filth, and that the prevalence of the complaint during hot summers is due, first to the amount of dust prevalent during a dry summer, and secondly to the opportunity afforded by high temperatures for the growth of infecting organisms in milk and other infant foods."

184. Referring to Typhoid Fever, DR. WHITEHOUSE says:—"During the past year 26 cases of this disease were notified, as compared with 32 in 1909, and 15 cases in 1908, which year was exceptional, as shewing the lowest number of cases notified from this disease since the Notification Act came into force in 1890.

"The prevalence of this disease is generally considered an index of the sanitary state of a district, and such a small number of cases in so densely a populated town is an indication of a good sanitary condition as regards its water carriage system, sewage, drainage, etc.

"Five deaths were attributed to this disease, all of which were registered as having occurred in the Borough."

The Report deals with the important question of convalescent Typhoid patients acting as possible "carriers" of infection, and of this DR. WHITEHOUSE says:—"It is obviously in the patient's interest to secure a speedy recognition of the condition with a view to cure, and to avoid the terrible disabilities incurred by "carriers" when their condition becomes known. As it is in the public interest that those who are "carriers" should become known, and as there is no legal power to obtain this inform-

ation, it should be secured by voluntary co-operation between Medical attendants, patients, and the Public Health Authority."

He further states that in no instance was well water used, nor was the milk supply suspected as a source of infection.

185. No case of Small-pox has occurred in the Borough since 1906.

186. It is reported that five cases of Puerperal Fever were notified in the practice of Midwives, and two in the practice of Medical men—of these seven cases three died.

With reference to this Dr. WHITEHOUSE says:—"Every precaution was taken to prevent the disease being conveyed to other women, and it is gratifying to remark that much greater care is now taken by Midwives in cleansing themselves and their clothing and appliances than in previous years."

The Report also states that disinfection was carried out in all cases.

187. With regard to Ophthalmia Neonatorum Dr. WHITEHOUSE urges that this should be made one of the notifiable diseases.

188. Fifty-six cases of Erysipelas were notified during the year, as compared with 22 in 1909; one death was registered from this cause.

189. With reference to Phthisis, Dr. WHITEHOUSE reports:—"Phthisis was the cause of 94 deaths during 1910, as compared with 96 deaths during 1909. Twenty of these deaths occurred in Institutions outside the Borough."

Other forms of Tuberculosis accounted for 20 deaths.

Under the Public Health (Tuberculosis) Regulations, 68 notifications were received.

The Report also deals with the question of utilizing the Small-pox Hospital for Phthisis cases, and contains a joint Report on this matter by the Mayor and the Medical Officer of Health.

190. The subject of a clean Milk supply is also dealt with, leaflets concerning this having been distributed to farmers and dairymen supplying Milk to Aston Manor.

191. Five deaths occurred from Influenza, and 65 from Cancer.

192. With regard to general sanitary administration and closet accommodation, there were in all 2,968 nuisances or sanitary defects dealt with, and 396 privy-middens abolished and replaced by water closets.

The Report states:—"It is estimated that 90 per cent. of the closet accommodation of the Borough consists of water closets."

193. Dr. WHITEHOUSE deals at considerable length with the Smoke nuisance, and suggests that a Corporation Bill should be presented to Parliament, with special clauses conferring upon the Local Authorities the means of coping with the nuisance. Further he says:—"I cannot urge too strongly the need of arming the Corporation with adequate authority to deal with the physical evils caused by the prevalence of smoke."

194. Systematic house-to-house inspection has been carried out as usual, and 482 houses have been thus inspected in the following streets:—Kensington Street, Denmark Street, James Street, Lower Wilton Street, Whitehead Street, New Street, and Inkerman Street.

195. With regard to house accommodation, DR. WHITEHOUSE reports that the houses in the Borough are largely of the artizan type. He says:—"The proportion of houses known as 'back-to-back' in those streets which have been systematically inspected up to the present is estimated at 56.6. This would be a considerable over-estimate as applied to the Borough generally, as your Inspector explains in his Report that the streets on which this estimate is based are the older and poorer ones, and the proportion of 'back-to-back' houses in the more modern and better streets not yet systematically inspected would be much less."
197. Of the 478 dairymen and purveyors of milk on the register, 35 received notices to cleanse milk stores or milk shops. All were complied with.
198. Nine instances of overcrowding were investigated, and five notices served.
199. With reference to the sewerage work done during the year the Borough Surveyor reports:—"No new sewers have been laid during the year, but a very important piece of work in connection with the sewerage system has been carried out by this Corporation in connection with Handsworth and Smethwick. The work comprises the construction of a storm-water over-flow to carry off flood water in times of storm, and so relieve the main sewer which drains the southern portion of the district. Any necessary small repairs have been carried out to the sewers, but none are of sufficient magnitude to warrant special mention."
200. No complaints were made during the year in connection with Offensive Trades in the Manor.
201. To the 28 registered Slaughterhouses 397 visits were paid and 14 notices served. There was one formal seizure of unsound food during the year from a butcher's premises.
202. With reference to House Refuse Removal and Disposal, it is reported that all night-soil and house refuse is destroyed by burning. Ashpits and middens are emptied on application, dust-bins and tubs periodically. From the Sanitary Inspector's Report it would appear there were 8,930 ashpits, 1,489 dust-bins or tubs, and 904 middens.
203. The Report deals fully with the administration of the Factories and Workshops Act.
204. As regards Hospital Isolation, it is reported that 366 cases of Scarlet Fever, or 82 per cent. of the notified cases, were isolated. In addition, 132 cases were admitted from the outside contributory sources, making a total of 498 cases admitted to Hospital during the year. There were ten deaths in hospital, giving a mortality rate of 2 per cent. on the number of cases admitted.
- Referring to return cases of Scarlet Fever DR. WHITEHOUSE says:—"Nine such cases were recorded, but there is no doubt that certain of these so-called 'return' cases were not due to the Hospital. Every precaution is taken to guard against them, and all parents sign one or other of the following forms when taking the patient from the Hospital. No infected clothing leaves the Hospital, the parents of each patient supplying clothes on their discharge."
205. Included in the Report is a Summary of the Health Visitor's Report, in which it is stated that 1,629 visits were made to the homes of babies, and 844 re-visits, giving a total of 2,473.

With reference to Baby Feeding the Report states:—"It is after the breast milk disappears that the real trouble commences, and in some families baby after baby suffers from Rickets and Wasting Diseases. In the poorest of homes the milk is frequently given too greatly diluted, and is insufficient for the babies' needs."

Continuing, DR. WHITEHOUSE says:—"It is such cases as these that show the immediate necessity of providing Milk Depots and Infant Consultations in every suitable locality."

"The Midwives receive the visits to their patients quite cordially, and support our efforts in advising the mother in the care of herself and her offspring."

206. There is also included in the Report a Summary of the Medical Inspection of School Children.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
86,269	23·2	11·9	1·1	109

BULKINGTON.

207. Dr. Lionel Orton estimates the population at 1,680.

208. The Death-rate of 15·4 was much lower than last year, when it reached the high figure of 21.

209. The Birth-rate was 30·3, only slightly lower than last year.

210. The Infantile Mortality is still very high—175 per 1,000 births registered. The deaths of children under one year of age were due to Enteritis, 3; Premature Birth, 2; Convulsions, 2; Bronchitis, 1; and Pneumonia, 1.

211. The Zymotic Death-rate is 1·2.

212. Of twenty-four notified cases of Scarlet Fever, eight were removed to Hospital. No deaths were recorded from this disease.

213. The Report states that the Factories and Workshops in the District have been visited from time to time, and have been found satisfactory.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
1,680	30·3	15·4	1·2	175

ERDINGTON.

214. DR. BOSTOCK HILL estimates the population in the middle of the year at 33,916. Deducting from this, however, the inmates of institutions in the district, it would appear to be 31,500, an increase of 1780 on the estimated population of the previous year.

215. The Birth-rate of 24·95 was considerably lower than last year, and the lowest, with one exception, for the last ten years.

216. Although 739 deaths were registered, only 276 are to be debited to the District, which gives a Death-rate of 8·76, an exceptionally low figure.

217. The Infant Mortality of 89 per 1,000 births, is rather higher than that of the previous year, the figure then being the comparatively low one of 74.

218. The causes of death under one year were:—Whooping Cough 2, Diarrhœa 5, Enteritis 1, Premature Birth 15, Congenital Defects 6, Atrophy and Marasmus 8, Tuberculous Meningitis 1, Tabers Menenterica 1, Meningitis 2, Bronchitis 6, Convulsions 2, Pneumonia 7, Suffocation 1, other causes 3.

219. With reference to the work of the County Health Visitor resident in Erdington, DR. BOSTOCK HILL says:—"Owing to the illness of one of the Health Visitors in the early part of the summer, rather less time was given (to infant visitation) than has been the case in the past, but still much good work has been done."

220. DR. BOSTOCK HILL congratulates the Council on having adopted, immediately after the end of the year, the Notification of Births Act, 1907. He says:—"I have not the least doubt that one of the main factors touching Infant Mortality is the question of the proper feeding of infants, proper, that is, not only in quantity, but in quality." Continuing he says:—"I cannot understand how any Council, situated as we are in Warwickshire, could refuse to adopt the measure, fraught as it must be, with so many possibilities of improvement of the public health and national physique."

221. The Zymotic death-rate was 0.73 per 1,000. Twenty-three deaths were registered from the principal Zymotic diseases, namely:—Whooping Cough 8, Diphtheria 8, Scarlet Fever 1, and Diarrhœa 6.

222. No case of Small-pox occurred during the year.

223. Scarlet Fever accounted for 145 notifications, with the extraordinary low case mortality of 0.68.

224. Not a single death was registered from Measles. Of this DR. BOSTOCK HILL says:—"Arrangements have been made by means of which the School Teachers and the School Attendance Officers notify all cases of infectious or suspected infectious disease to the Medical Officer of Health, and the total number of cases of Measles notified from this source has been eight."

225. Diphtheria accounted for eight deaths. The Report deals with an outbreak in connection with the Moor End Schools in the Autumn.

DR. BOSTOCK HILL says:—"I was in constant communication with an Assistant County Medical Officer, who kept the Schools under observation, and swabbed at frequent intervals all known cases, all suspected cases, and many who had been associated with suspected cases."

Continuing he says:—"Never in the history of Diphtheria in Erdington has an outbreak been so scientifically dealt with, and I found it quite possible to control the epidemic without proceeding to that somewhat unsatisfactory and unscientific method of closing the whole School and upsetting the educational arrangements of the neighbourhood."

226. With regard to Anti-toxin supplied by the Council, DR. BOSTOCK HILL says it has been much more in demand than in past years, accounting no doubt for the low mortality during the past year.

227. Eight cases of Typhoid Fever were notified, 5 from the Workhouse and 3 from the district proper. There appeared, however, to be an element of doubt with regard to the diagnosis of these latter cases.

228. Seven deaths were registered from Diarrhœa, rather a high figure considering the cool Autumn of last year.

229. Phthisis was responsible for 15 deaths, compared with 19 and 23 in the two previous years.
230. Eleven notifications of Phthisis in poor persons have been received, and every case has been visited by the County Health Visitor. Where deaths have occurred, thorough disinfection has been carried out by the Sanitary Staff.
232. With reference to systematic inspection of the smaller houses, 1,501 have been inspected, and defects found, remedied, and that without the necessity of legal proceedings.
233. The Report deals with the Water supply, which frequent analysis has shewn to be good—as the district is supplied almost entirely now with the City of Birmingham Welsh Water.
234. With regard to Offensive Trades, it is gratifying to note that there is no such business now carried on within the district.
235. Included in the Report is one from the Surveyor to the District Council, giving a detailed account of work done in his department.
236. With regard to New Buildings, he states that the prevailing depression in the building trade spread to Erdington during the year under review.
237. Mention is made of the erection of new works and extensions to the existing works at Witton, and of important developments about to take place at Bromford.
238. One thousand eight hundred and twenty-two lineal yards of new roads have been in course of construction during the year.
239. As regards Sewerage, he states that the scheme for the sewerage of Bromford has been settled upon, and plans will shortly be ready for presentation to the Local Government Board.
240. The new Park called “Brookvale Park” was formally opened on October 12th.
241. Public Lavatories have been erected at the Tram Terminus at Chester Road, in Wood End Road and Orphanage Road.
242. DR. BOSTOCK HILL states that the Public Scavenging has been excellently carried out.
243. Referring to privy-middens he says that hardly one remains in those portions of the district where sewers are available.
244. Work done under the Housing and Town Planning Act is recorded, and mention is made of the closure of three houses on account of faulty water supply, no other being obtainable.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
31,500	24·95	8·76	0·73	89

KENILWORTH.

245. DR. TANGYE estimates the population at 5,270.
246. The Birth-rate, which was below the average for the last ten years, was 21·6 per thousand.
247. Seventy-one deaths were registered, four of these occurred at Hatton County Asylum, and 2 in Leamington public institutions—giving a Death-rate of 13·5 per thousand, as compared with 15·9 for the preceding year.

248. The Infant Mortality was very low, 53 per 1,000 births. No infant death was due to infectious disease or Diarrhoea.
249. There were 6 deaths from Phthisis and 5 from other Tuberculous diseases.
250. Seven cases of Scarlet Fever were notified during the year, 2 of Diphtheria, and 3 of Erysipelas.
252. Of the 2 Diphtheria cases, one occurred in a cottage, the drainage of which was very defective, the source of infection in the other case being traced to an infected case in another district. Both were removed to hospital.
253. Only one case was notified under the Public Health (Tuberculosis) Regulations, this terminating fatally within a week. The premises were afterwards disinfected.
254. Appended is a Report of the Sanitary Inspector, which states that of 186 nuisances, respecting which 59 Informal and 127 Statutory Notices were served, 145 have been abated. Of these 4 were dwelling-houses in foul and verminous conditions, 2 of overcrowding; 3 dwelling-houses unfit for habitation (Housing and Town Planning Act, 1909); 4 sanitary defects in Cowsheds, 10 defective traps on house drains; 17 unwholesome or insufficient water supply; and 13 insufficient W.C. accommodation.
255. The Report also deals with Sewerage and Sewage Disposal, Scavenging, Slaughter Houses, Factories and Workshops, Bake-houses, Dairies, Cowsheds and Milkshops Order, etc.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
5,270	21·6	13·5	Nil	53

LEAMINGTON.

256. DR. EDWARD BURNET has succeeded Dr. SAMUEL BROWNE as Medical Officer of Health for this Borough, and presents a Report on a very much larger scale than his predecessor.
257. He estimates the population in the middle of 1910 to have been 27,360.
258. Twenty-five new dwelling-houses were passed by the Town Council during the year, as compared with 18 in the previous year.
259. The number of births registered was only 414, giving a Birth-rate of 15·13 per 1,000 of the estimated population. Of these births, 18 were of illegitimate children. He gives a table showing how the Birth-rate has diminished from 28 per 1,000 in 1,880 to the very low figure of the year under review.
260. The deaths were nearly as numerous as the births, in fact only 12 less, giving a death-rate of 14·7, exactly equal to the average of the preceding ten years.
261. He refers to the Notification of Births Act, which he says came into operation in the Borough on July 13th, 1908.
262. He refers to the foundation of the Infant Health Society, which he describes as "The logical sequence of the adoption of the Notification of Births Act," and says that its two years work has amply justified its existence.

The following are the details:—

"The Society originally met every Friday afternoon at the Albert Hall in Kenilworth Street, but it has lately been found necessary to open a Branch in the South-East Ward also. At the weekly 'consultation' the infants are inspected and

weighed, breast feeding is advocated, and suitable diets are prescribed where breast feeding is impossible. In cases of necessity 'milk tickets' and infant clothing are provided. In all cases a homely welcome is given, the mothers being afforded opportunities and encouragement to discuss their difficulties with the sympathetic members of Committee over the inevitable cup of tea (for which a nominal charge is made).

"In 1910 the number of infants weighed weekly during the year was 112; there are still in attendance 65; and 84 have been supplied with one pint of milk daily. Of those in attendance, two only have died in the year, one having been accidentally suffocated, and the other being the victim of congenital disease. The Health Visitor (the School Nurse) has attended the 'consultations' weekly, and has visited 108 of the homes.

"There is a great future before the Infant Health Society, but its means are totally inadequate for its present requirements, irrespective of future developments. The central idea of the institution is the instruction of the mother as to how she may best perform her duties both to herself and to her infant, for the welfare of the latter. Around this central notion it is easy to conceive that other activities may cluster, such as home-visiting, classes in hygiene, cookery, and domestic economy; provision of meals to expectant and nursing mothers; the establishment of crèches and provident clubs, and the organisation of classes for young brides, and meetings for fathers.

"It will be seen, therefore, that the sphere of usefulness of the Infant Health Society is practically limited only by the funds at its disposal and the enterprise of its Committee of Management. Its functions are intimately related to the Public Health Department of the Borough, and are closely associated with the work of the Education Committee. I understand that the members of the latter have already taken the initiative in the proposed formation of a Domestic School for Girls. I trust it will blossom out as a well-organised school of mothercraft, and that the Council may be persuaded to countenance the Infant Health Society by affording substantial financial support, in order that it may become a more potent source of information and guidance for the betterment of the upbringing of infants and young children. In the meantime the Society has strong claims upon the generosity of the charitable.

263. DR. BURNETT records a reduced rate of Infant Mortality, 40·8 per cent. below the average of the 30 years 1880-1909, and 10·9 per cent. below the lowest rate hitherto recorded, that for the year 1908. He attributes this decrease to the comparative freedom from diarrhoeal disease. He discusses the chief causes of Infantile Mortality at some length, and says that he trusts that the points brought out will appeal to the Council as justifying the hope he has expressed of securing a diminished rate.

264. Dealing with Infectious Diseases, he shows that the incidence of Scarlet Fever has been the smallest since the adoption of the Notification Act, and no deaths were recorded during the year.

265. Twenty-eight cases of Diphtheria were notified, of which two died.

266. No cases of Typhoid Fever were notified in 1910.

267. Referring to Consumption, he deals with the Voluntary Notification established in Leamington, and shows how in that town it is absolutely ineffective. He calls attention to the new Order of the Local Government Board in reference to this disease.

268. Whooping Cough was responsible for seven deaths, but Measles for only two. He suggests the possibility of isolation of Whooping Cough and Measles by a re-arrangement of the existing state of things at the Heathcote Isolation Hospital.

269. He deals with the Water supply, and having shown that Chemical Analysis proves the good quality of the public supply, deals with those houses supplied from private sources. He shows that altogether 29 such houses at present exist.
270. The flushing of sewers has been carried out systematically throughout the year, partly by river water in carts.
271. He calls attention to the insufficient sanitary accommodation for women.
272. The Report deals with Common Lodging houses, the Housing of the Working Classes Act, Slaughter Houses, Offensive Trades, Cowsheds, Dairies, Milk Shops and Ice Cream Shops.
273. He also calls attention to the important question of pig keeping in the Borough, and suggests a method of proper sanitary construction of piggeries which might advantageously be utilized.
274. He also deals with the Local Administrative Acts relating to Factories and Workshops.
275. In conclusion he deals with the Meteorology of the Borough, and refers to the establishment of a Climatological Station, fulfilling the requirements of the Meteorological Office, South Kensington.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
27,360	15.1	14.6	0.44	74

NUNEATON.

276. In his opening remarks in the Report of this Borough for 1910, Dr. VIVIAN GRAY-MAITLAND, Deputy Medical Officer of Health, says:—"Owing to the sad illness of Dr. PEACOCK I am unable to obtain information on the work done in the earlier part of the year, and can only deal in detail with the work done since I have acted as your deputy, viz., during part of June and July, and again from September up to the present date."
277. The population, based on the number of houses in the Rate Book, he estimates as 37,267, an increase of 1,222 on the 1909 figure.
278. The Birth-rate of 32.2 per 1,000 is 1.0 higher than last year.
279. The Death-rate continues quite satisfactory, being 10 per 1,000, compared with 10.4 in 1909.
280. The Infantile Mortality was 97 per 1,000 births registered.
281. With reference to the sufficiency and quantity of Water supply, Dr. GRAY-MAITLAND says:—"A constant and abundant supply has been maintained throughout the year, but the Corporation have recently obtained sanction from the Local Government Board to a loan for experimental works at Griff, with a view to extending the supply, in order to make due provision for the rapid growth of the population of the Borough."
282. Mention is made of the pollution of the Sketchley Brook by the effluent from the Sewage Works of the Hineckley Urban District Council, the Report continues:—"The County Medical Officer of Health, Dr. BOSTOCK HILL, has dealt with this matter, and it is hoped that material improvement will be effected."

283. Referring to Private Wells in the Borough, he states that after analysis of six samples of well water, four were condemned, one was open to suspicion and the other satisfactory.
284. As regards Milk Supply, DR. GRAY-MAITLAND finds tuberculosis among the cows rare. He states:—"Most of the milk is sent to the large towns, and it is quite safe to say that the quality is good."
285. There are 21 Slaughter Houses in the Borough and a Public Abattoir. He says:—"I have personally visited all the Slaughter Houses and am pleased to report that without exception they were all clean. There have been no seizures of meat from them this year."
286. The Report refers to Bake-houses, Factories and Workshops, and a Common Lodging house. About the latter he says that on the occasions he has visited it, everything has been in a most highly satisfactory condition.
287. As regards Closet Accommodation, DR. GRAY MAITLAND states there are 1,073 privies with fixed receptacles and 2 with movable receptacles—and that during the year 116 privies have been converted into water closets. Continuing he says:—"In these days of advanced sanitation, and in a growing and important Borough like this, the existence of so large a number of ash-pit privies is, in my opinion, especially in the more densely populated areas, a menace to the health of the community, and no effort will be spared to gradually reduce the number."
288. Measles has been very prevalent, especially towards the end of the year. Eleven deaths have been registered, all under 15 years of age.
289. Thirty-nine cases of Scarlet Fever were notified during the year, compared with 37 last year. Only one death occurred. Referring to an outbreak at the Queen's Road Council Schools, DR. GRAY-MAITLAND states that the origin was, undoubtedly, traced to two children who were found attending School while actually peeling from this disease. After removal of these cases and disinfection of the Schools, no further outbreak occurred.
290. Twenty-one cases of Diphtheria were notified, as compared with 13 last year, eight of which died. An investigation was made into the possible source of infection in each of these cases.

Phthisis was responsible for 14 deaths, and other Tuberculosis diseases for 21. Only one case of Pulmonary Tuberculosis was notified under the Poor Law.

Dr. GRAY-MAITLAND states that the Sanitary Committee now supplies Anti-toxin free of charge for the use of all Medical practitioners in the Borough, and have this year purchased an Anti-toxin Syringe, which may be had at any time on applying at the Council Office. Continuing he says:—"Eight deaths out of a total of 21 cases is a very large percentage, and it is the earnest wish of the Sanitary Committee that the fullest advantage will be taken of this means of treating Diphtheria, not only in those cases where the disease is established beyond shadow of doubt, but also in all cases where its presence is a matter of grave suspicion."

291. Three cases of Puerperal Fever were notified, two of which died.
292. Eight cases of Typhoid Fever were reported, compared with six last year. One of these was fatal. All these cases, with the exception of one which occurred in the General Hospital, were visited in the endeavour to trace the origin of the disease. One case occurred where the well water was found to be polluted. The others appear indefinite in origin.

293. With reference to the Housing and Town Planning Act of 1909, DR. GRAY-MAITLAND says:—"The housing accommodation in the district for the working classes is ample." Advantage has been taken of this Act in that five houses have been demolished, and a considerable number made reasonably fit.

294. The Notification of Births Act (1907) has now been adopted by the Council. In dealing with this subject the Report states that 41·8 per cent. of the Infantile deaths occurred under the age of 4 weeks. DR. GRAY-MAITLAND continuing says:—"It would of course be a travesty in many cases where, from the circumstances of the parents, and from the skilled attention given to the infant, for such cases to be visited by the County Health Visitor, but in very many more cases such visits can only be attended by the best results, and must be a means of instructing and educating a large portion of the poorer parents in the right way of looking after and feeding the infant."

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
37,267	32·2	10·	1·4	97

RUGBY.

295. The population, DR. TANGYE estimates, at 22,800.

296. The Birth-rate of 18·9 per 1,000, is below the average of the previous ten years.

297. One hundred and seventy-seven deaths were registered, giving a Death-rate of 7·8 per 1,000. This is the lowest Death-rate on record.

298. The Infant Mortality was 60 per 1,000 births. Premature births and congenital defects accounted for 12 deaths; Wasting Disease, 4; Bronchitis, 3; Convulsions, 3; and Pneumonia, 5.

299. Measles was responsible for 8 deaths of children between 1 and 5 years of age.

300. DR. TANGYE reports:—"Two fatal cases of Typhoid Fever occurred during the year, one in Hillmorton Road, and one in the Hospital of St. Cross, after removal from Rowland Street. In neither case could any sanitary defect be found to account for the infection, and the second case was in all probability contracted outside the town."

301. No death was due to Scarlet Fever, Diphtheria or Puerperal Fever.

302. The Zymotic death-rate was 0·44 per 1,000.

303. Phthisis accounted for 18 deaths, and other Tuberculous Diseases 5.

304. Sixteen deaths were due to Cancer.

305. Of 64 notifications, 27 were due to Scarlet Fever, 20 to Diphtheria, 6 to Erysipelas and 3 to Puerperal Fever.

306. With reference to Scarlet Fever, DR. TANGYE says:—"It is of special interest to note that 21 of the 27 cases occurred singly, in 21 different houses, the remaining 6 occurring in three different houses."

307. Of Diphtheria he says:—"Two of the 20 cases of Diphtheria were imported directly from outside, one being admitted to the Hospital from Braunston in April, and the other to the Union Workhouse from Brandon in July. With regard to the latter case, I must point out the danger that attends admission of infectious cases to the Union Infirmary, which is not adapted for the reception of such cases."

308. Five cases of Diphtheria occurred at one of the houses of the School, the others being more or less scattered through the town.

309. With reference to the three cases of Puerperal Fever, one of which was admitted to the Workhouse Infirmary from Ryton, DR. TANGYE says:—"The two latter cases occurred in the practice of registered Midwives, and—as usual in such cases—I made a careful enquiry, and inspected the Midwives instruments, etc., and they were not allowed to resume practice until after the requisite period of abstention."

310. Only one case of Phthisis was notified under the Public Health (Tuberculosis) Regulations, 1908.

311. Appended are the Reports of the Surveyor and Sanitary Inspector.

312. The Inspector's Report states that 345 nuisances have been abated.

313. Mention is made of the number of Schools that were closed in the early part of the year on account of Measles.

314. The Report also deals with Slaughter Houses, Unsound Food, Dairies and Cow-sheds—which are said to be fairly well kept—Factories and Workshops, and Common Lodging Houses.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
22,800	18·9	7·8	0·44	60

STRATFORD-UPON-AVON.

315. DR. THOMPSON reports that the mortality rates were exceptionally low, the Death-rate being 10·7 per 1,000.

316. The Infantile mortality was as low as 45 per 1,000 births registered.

317. Very few cases of notifiable Infectious Disease occurred in the District—Diphtheria, 2; Erysipelas, 6; and Scarlet Fever, 3. No deaths occurred from any of these diseases.

318. Two deaths were registered from Whooping-Cough; Phthisis, 7; other Tuberculous Diseases, 3.

The Birth-rate, 18·6, was abnormally low.

319. The Report deals at considerable length with the question of cottage property in the Borough. DR. THOMPSON believes that during the past fifteen years the available housing for the poorer classes has diminished. He supports the proposed erection of working men's cottages by the Corporation, and in speaking of overcrowding he says:—"At present it is futile to attempt to deal with such cases, when, as is usual, there is no vacant housing accommodation to receive the occupants of an overcrowded or unsanitary dwelling."

Continuing on this subject he says:—"I would like to express the opinion that if cottages are built they should have three bedrooms, with a fire-place in one, if not in all."

320. DR. THOMPSON has visited all the Slaughter-houses and found them in every way satisfactory.

With reference to Meat Inspection he reports:—"As regards 'Foreign meat,' of which a considerable quantity is brought to Stratford, I have expressed the opinion that I am open to condemn any such which bears evidence of soiling due to wrappers

being torn by rough handling, for I consider that if such meat is fit for human consumption, the proof it is so rests with the owner of it."

321. In recommending the adoption of the Notification of Births Act, Dr. THOMPSON says:—"The value of this early information on births is that no time is lost in acquainting Health Visitors of the whereabouts of infants among the poorer classes."

322. With reference to the Public Water supply, he states that on analysis this is quite satisfactory. He is of opinion, however, that the filter beds at the town reservoir have to deal with an excessive amount of red marly suspended matter from off the gathering ground, and he says:—"Any procedure possible to lessen the amount of this would be a great advantage."

323. Referring to the work of the County Health Visitors, Dr. THOMPSON reports:—"The work done by the County Health Visitors in the Borough is most thorough, and I think the town and the adjoining Stratford-on-Avon Rural District could keep one fully employed."

324. In dealing with Dairies, Cowsheds and Milkshops, he reports that one prosecution occurred during the year of a milk dealer for selling milk below the recognised standard.

325. Three notifications of Pauper cases of Tuberculosis were received during the year. Referring to Tuberculosis Dr. THOMPSON reports that the question of using the Small-pox Isolation Hospital as a local Sanatorium for Tuberculosis was considered by the Joint Committee of the Stratford-on-Avon Town Council, Stratford-on-Avon Rural District Council, and Marston Sicca Rural District Council, but owing to the County Sanatorium scheme the matter was dropped.

326. With reference to Schools Dr. THOMPSON says:—"The provision of bathing accommodation for school children would go far in improving the children's health, and is practically indispensable as an adjunct to the medical inspection of school children."

327. The following Notification Forms of disease among school children in the Borough were received:—Mumps, 58; Whooping-Cough, 41; Chicken-pox, 12; Ringworm, 21; Sores, about body, Eczema, 10; Scarlet Fever, 2.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
8,310	18·6	10·7	0·2	45

SUTTON COLDFIELD.

328. Dr. BOSTOCK HILL estimates the population to be 21,780, an increase of 455 on the previous year.

329. The Birth-rate of 18·41, although a slight improvement on last year, is still very low.

330. The Report deals at considerable length with the desirability of adopting the Notification of Births Act.

331. The very satisfactory Death-rate of 9·91 is recorded.

332. There were 42 deaths in children under one year, giving an Infant Mortality rate of 104. Among the causes of these infantile deaths, Premature Birth accounted for 6; Debility, 7; Convulsions, 4; and Enteritis, 7. With reference to this Dr.

BOSTOCK HILL says:—"I am pleased to note that the number of deaths due to Premature Birth is lower than in the previous year, but an unsatisfactory point was an increased mortality due to Debility, Convulsions, and Enteritis. The two latter causes may possibly be associated with improper infant treatment, and call particularly for attention, in order that any deficiency of the kind may be remedied."

333. Only seven deaths were registered from Zymotic diseases:—Scarlet Fever, 3; Diphtheria, 1; Whooping Cough, 2; and Diarrhoea, 1.

334. Of Scarlet Fever, 71 cases were notified, a small number considering the prevalence of the disease in the neighbouring districts.

335. Fourteen cases of Diphtheria were notified. Referring to the negative results obtained from some of the swabs of these fourteen cases, DR. BOSTOCK HILL says:—"It is well therefore, as is well known now, to take more than one swab in a case which appears to be clinically positive, though, bacterially, negative results may have been obtained." DR. BOSTOCK HILL also accentuates the importance of obtaining two negative swabs before a child who has been suffering from Diphtheria is allowed to return to School or mix with others.

336. Only one case of Typhoid Fever was notified during the year, and this was imported from abroad.

337. With reference to Phthisis, 6 Pauper cases were notified, and 14 deaths were registered. The Report states that all known cases were visited by the County Health Visitor, and in every fatal case the garments, bedding, etc., were thoroughly disinfected. Referring to Voluntary Notification of this disease, DR. BOSTOCK HILL says:—"This might be of some use, but undoubtedly a large number of cases which ought to be reported, reach the ears of the Sanitary Staff only by chance. I do not think at the present time that public opinion is perhaps quite ripe for the compulsory notification of Phthisis, but it is quite evident to me that before all that is possible can be done, such notification of the disease must be put in operation."

338. DR. BOSTOCK HILL says, in dealing with disinfection:—"During the year the scheme which I suggested a short time ago has been carefully carried out by the Inspector's staff, and fumigation as a primary means has been entirely given up, and all rooms, etc., where disinfection is considered necessary, are sprayed with 'Formaldehyde,' though fumigation may be used subsequently in some instances."

339. Referring to Sewerage and Sewage Disposal, DR. BOSTOCK HILL quotes a Report from the Borough Surveyor on the work done in his department. In reference to this he expresses satisfaction at the progress made in the sewerage of Hill and Streetly.

340. With reference to removal of household refuse he says:—"1910 was the first full year that the scheme for the removal of household refuse has been in operation. During the year 40,841 ashpits and ashbins have been dealt with. This shews a considerable increase relatively on the nine months of the previous year during which the scheme was in operation, as more than twice as many receptacles have been dealt with as in the previous nine months.

"Looking at the fact, as I pointed out last year, that there were 4,598 inhabited houses in the Borough, it is obvious that the removal is not taking place on the average as frequently as is desirable. This fact is additionally proved in that 1,524 applications have been made during the year for the removal of ashes, dust, etc.

"I am pleased to be able to report that the applications have been fewer in the last quarter of the year, but I cannot consider the present system as completely satisfactory, in that a regular system has not been adopted of removal at frequent intervals without waiting for requests of householders stating that their receptacles were full to overflowing. A system which waits for removal of refuse till the conscience of the occupier is aroused is certainly incompatible with the practice of hygienic methods in the year 1910. I trust, therefore, that during the coming year, when new estimates are prepared, arrangements will be made to put this removal of refuse on a proper sanitary basis, and in accordance with the general sanitary administration of the town.

"I am pleased to be able to report that 16 more of the existing old-fashioned privy middens have been converted to water closets. At the present time the Inspector informs me that only nine such insanitary appliances exist in the populous parts of the town.

"I feel sure that the Committee will, for the credit of the Borough, desire that these nine middens should be converted during the coming year, and I trust, therefore, that the necessary orders will be given to attain this end.

"I am also pleased to report that 13 more of the waterless water-closets, that is those not supplied with flushing cisterns, have been done away with, and properly-flushed water-closets put in their places."

There are still about 30 similar closets in the Borough, and DR. BOSTOCK HILL hopes that these will also be converted at an early date.

341. The Water Supply, on analysis, has been satisfactory throughout the year.
342. The Report deals with Slaughter Houses, and Dairies and Cowsheds.
343. As regards Offensive Trades, one fresh licence was granted.
344. Under the Housing and Town Planning Act 380 houses were inspected, and two closing orders made.
345. Referring to Vaccination, DR. BOSTOCK HILL says:—"The number of people availing themselves of the opportunity of obtaining Conscientious Objection Certificates has increased. In 1909 the number of such certificates obtained was 53, in 1910 it was 63. This is a very serious matter, but one the effects of which will be felt only in the years to come."
346. The Report deals with Factories and Workshops, and with the Meteorological observations in the Borough.
347. Owing to the increase of work necessitated by the Housing and Town Planning Act, DR. BOSTOCK HILL strongly recommends that the Sub-Inspector be made a whole-time officer of the department.
348. He considers also that the following matters call for attention:—
 1. The adoption of the Notification of Births Act.
 2. The improvement of the scheme for Public Scavenging.
 3. The abolition, first of all in the central wards of the town, and later on in other districts of privy middens and "waterless water closets."

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
21,780	18.41	9.91	0.32	104

WARWICK.

349. DR. TANGYE estimates the population of the Borough at 12,450.
350. The Birth-rate of 21·8 per 1,000, is below the average for the previous ten years.
351. The lowest Death-rate on record was registered, namely 11·6 per thousand.
352. The Infant Mortality was 62 per 1,000 births. Of these deaths under one year of age, 5 were due to Premature Birth, and only 1 to Diarrhoea.
353. Phthisis was responsible for 13 deaths, and other Tuberculous disease for 2. DR. TANGYE says:—"The average annual number of deaths from Tuberculosis during the past ten years is 15·8, so that it does not appear that there has been any actual decrease in the number of deaths of late years from this disease in the Borough."
354. Cancer accounted for 20 deaths.
355. The Report deals with the outbreak of Ptomaine Poisoning from the consumption of "a la mode" beef, supplied to a local tradesman from a Birmingham firm. Twenty people suffered as the result of this poisoning, one case proving fatal.
356. With regard to Infectious Diseases, 50 notifications were received—Diphtheria, 21; Scarlet Fever, 17; Erysipelas, 10; Typhoid Fever, 2. Thirty-eight of these cases were removed to Hospital.
357. Four deaths were due to Diphtheria, one to Scarlet Fever, and three to Measles.
358. Under the Public Health (Tuberculosis) Regulations, 1908, fourteen cases of Phthisis were notified, but of these only two cases belonged to the Borough, the others coming from the Union Workhouse.
359. During the year, three Schools were closed on account of Measles, and one on account of a mixed epidemic of Mumps, Chicken-pox and Whooping Cough.
360. The Surveyor, in his Report, states that only 10 new houses have been erected as against 11 in 1909.
361. He refers to the work done in mitigating the dust nuisance, and to the laying of a portion of the Market Place with Bituminous Macadam.
362. The Water supply has been satisfactory, and an additional main has been laid to augment the supply to the Workhouse.
363. He also states:—"I have prepared plans and estimates for the immediate execution of works for the more efficient purification of the sewage of the Borough."
364. Appended is the Report of the Sanitary Inspector, in which he states that during the year 633 nuisances have been abated.
365. With reference to the housing, Town Planning, etc., Act, he says:—"Several lots of property have been inspected under the above Act, and the Reports are awaiting a meeting of the Housing Committee, to which the matter has been referred."
366. The Report also deals with Water Supply, Infectious Diseases, Canal Boats, Slaughter Houses, Factories, and Workshops, etc.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
12,450	21·8	11·6	0·96	62

RURAL DISTRICTS.

ALCESTER.

367. DR. BROWNE estimates the population at 11,400, the same as last year.
368. The Birth-rate of 22·63 is only slightly below the average of the past ten years.
369. One hundred and sixty-one deaths were registered, the death-rate being 14·12 per 1,000.
370. The low Zymotic death-rate of 0·17 is recorded, the only two Zymotic deaths being due to Whooping Cough.
371. Twenty-five deaths under one year of age were registered, giving an Infantile Mortality rate of 96·03 per 1,000 births. Premature Birth accounted for 3, Congenital Defects 1, Debility from Birth 3, Suffocation from Overlaying 1.
372. Forty-five notifications of Infectious disease were received:—Scarlet Fever, 39; Diphtheria, 1; Erysipelas, 5.
373. Of the Scarlet Fever cases, all were removed to Hospital, and there were no deaths.
374. There were no cases of Typhoid Fever nor of Small-pox.
375. Nine deaths were registered as due to Phthisis. Of this DR. BROWNE says:—
“Your Inspector visited and disinfected the houses where these deaths occurred, and ordered a thorough cleansing of the premises. I have not received any notifications under the 1903 Regulations.”
376. With regard to Inspection of the District, DR. BROWNE says:—“I have made a systematic inspection of the District alone and in company with your Inspector, and have submitted Reports to you as a result of these inspections.”
377. With reference to Water Supply it is reported that the improvement in the supply from the Alcester Company has been maintained.
378. In dealing with Sewers and Drainage, DR. BROWNE states:—“The Sewers in Alcester have been well flushed, and the automatic tanks are in good order.
“The system of disposal at Crabbs Cross remains the same, and with proper attention might be continued with very little nuisance.
“It cannot be called an ideal system, and as the Local Government Board held an enquiry into the drainage of Hunt End and Crabbs Cross a few months ago, they will probably put pressure on to you to improve the system, and to join with the Feckenham Rural District in a joint scheme.”
379. Improvement is reported in the Scavenging of Alcester, Studley, Ipsley, and Bidford.
380. With reference to work under the Housing and Town Planning Act, DR. BROWNE says:—“Ten houses in the parishes of Broom and Alcester have been reported on, and the necessary work done to put them in a habitable condition. It was not necessary to order the closure of any of them.”
381. The Report also deals with Bakehouses, Slaughter-houses, Dairies, Cowsheds, and Milkshops.

382. With regard to Factories and Workshops, DR. BROWNE states that they have been duly visited. Defective ventilation received attention in five, and in seventeen others sanitary defects were dealt with.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
11,400	22.63	14.12	0.17	96

ATHERSTONE.

383. DR. HERRING estimates the population, based on the excess of births over deaths, to be 18,810.
384. The Birth-rate of 31.31 is reported as much below the average for the previous ten years.
385. The Death-rate of 11.64 per 1,000, is the lowest recorded for the last ten years.
386. The Zymotic death-rate was 1.4 per 1,000. Of the 27 deaths, Measles caused 4; Scarlet Fever, 10; Whooping Cough, 5; Diphtheria, 1; Typhoid Fever, 2; Diarrhoea 5.
387. There were 45 deaths registered under one year of age, the Infant Mortality being 76 per 1,000 births. Of these deaths, Premature Birth was responsible for 11, Marasmus 9, Bronchitis and Pneumonia 7, and Diarrhoea 5.
388. The following Infectious Diseases were notified during the year:—Scarlet Fever, 320; Erysipelas, 16; Diphtheria, 10; Typhoid Fever, 8; Puerperal Fever, 2.
389. The Report deals at considerable length with a severe epidemic of Scarlet Fever, which necessitated a Special Report to the Local Government Board.
390. With reference to the persistence of the outbreak, DR. HERRING believes this to have been due in great part to the carelessness of parents in the isolation of patients in their own homes.
- Continuing he says:—"There seems a likelihood that the epidemic has at last been conquered, although even now any carelessness in dealing with the 'slight' home-nursed cases may cause a recrudescence of the disease and find us struggling with the fever cases much in the same way as in the early days of December.
391. The ten cases of Diphtheria occurred chiefly in the Hartshill and Ansley parishes.
392. With regard to the origin of the disease, DR. HERRING believes it to have been imported from Staffordshire.
393. Six cases of Typhoid Fever occurred at Hartshill and Chapel End, concerning which a Special Report was sent to the Local Government Board. One of these cases, after removal to Hospital, proved fatal.
394. The Infant School at Hartshill was closed towards the end of the year on account of an outbreak of Measles.
395. DR. HERRING reports on the inadequacy of the present Isolation Hospital at Mancetter and says:—"I am therefore very pleased indeed to be able to report that at last a commencement has been made with the new Isolation Hospital at Archer's Hill, Grendon—a well-planned and convenient building of 30 beds."

396. With reference to Water Supply DR. HERRING reports on the very objectionable colour of the water, due to the presence of Ferrie Oxide. He says:—"Although not a dangerous constituent of the water, its presence is undesirable, and efforts should be made to get rid of it."
397. He also reports a "Shortage" of Water supply to Hartshill Schools and Coppice Lane.
398. The Report also deals with the newly constructed Sewage Disposal Works at Polesworth. DR. HERRING states that the general plan of sewage disposal seemed to be very excellent, and it is his opinion that the Sewage Scheme as a whole will have a decidedly beneficial effect on the health of Polesworth.
399. Appended is the Report of the Sanitary Inspector, in which he states that 252 notices were served for the abatement of nuisances.
400. Twenty-seven privies have been converted into water-closets, and 7 additional water-closets provided.
401. Thirty-six galvanized-iron portable bins have been provided in place of insanitary ashpits.
402. With reference to Dairies and Cowsheds, the Inspector says:—"While generally these premises are kept in a fairly clean condition, I find that some cow-keepers have no idea of the importance of a "clean" milk supply, and need constant supervision owing to the filthy condition of the cowsheds and cattle."
403. Referring to outworkers he reports:—"Several infectious cases have occurred at these houses, all work being discontinued, and the employers notified."
404. Of the 356 cases of infectious disease notified, 142 were removed to Hospital.
405. Referring to houses at Baddesley dealt with under the housing Act, 1900, says:—"I have made several inspections with regard to this Act, which I anticipate will shortly be put into active operation in this District."

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
18,810	31·31	11·64	1·4	76

BRAILES.

406. DR. FINDLAY estimates the presumably decreasing population to be 5,847.
407. The very low birth-rate of 18·6 is recorded.
408. The Death-rate of 15·7 per 1,000 is lower than last year, and very near the average for the previous ten years.
409. Infant Mortality was equal to 82 per 1,000 births registered, rather higher than last year.
410. Two deaths were registered from Whooping Cough and one from Diarrhœa, giving the Zymotic death-rate of 0·5 per 1,000.
411. Only seven notifications of Infectious disease were received, as compared with 35 last year, and 65 the year before. These were, Scarlet Fever, 5; and Erysipelas, 2.

412. Of the Scarlet Fever cases, DR. FINDLAY says that one was imported from Birmingham, but that this case was immediately sent back, special precautions being taken in doing so.

The other cases were at Sutton and Whichford, all related to each other. These cases were removed to Hospital and no further cases occurred.

413. No cases of Diphtheria or Typhoid Fever were notified during the year.

414. With reference to Whooping Cough, he states that a considerable number of cases occurred at Honington and Burmington, necessitating School closure at both these places.

415. Schools were also closed at Ilmington on account of an outbreak of Mumps.

416. Influenza is reported as being prevalent and virulent, especially amongst old people, eleven deaths being registered from this disease.

417. Four deaths were registered from Phthisis, but no notifications were received under the Public Health (Tuberculosis) Regulations nor under the voluntary system adopted by the Council.

418. Referring to action taken to prevent the spread of disease in the District, DR. FINDLAY says:—"The information received from head-teachers of the outbreaks of infectious diseases among the children has proved very useful, and the careful exclusion of children from School has, in several instances, I think, prevented epidemics and the necessity for closing the school."

419. Continuing he says:—"The subject of Diphtheria Anti-toxin was considered by the Council, and, acting on my advice, three depots have been established in the District, at Long Compton, Brailes, and Tysoe, where a supply of Anti-toxin is kept, together with a suitable syringe and sterilized swabs addressed to the University of Birmingham, so that specimens of membrane or saliva may be sent at once."

420. Referring to the Sanatorium treatment of Pulmonary Tuberculosis, DR. FINDLAY says:—"I should like to suggest that the Council procure a portable revolving shelter hut for the use of suitable patients. In this way suitable cases might be treated without the expense of sending them to a Sanatorium, which necessarily must be at a considerable distance from this part of the County."

421. DR. FINDLAY urges the adoption by the Council of the Notification of Births Act.

422. The report deals with house-to-house inspections made in company with the Sanitary Inspector at Burmington, Little Wolford, Whateote, Brailes and Tysoe.

423. Work under the Housing and Town Planning Act has been taken in hand, and DR. FINDLAY reports having made a list of three houses urgently needing thorough inspection. These, he states, have been reported on to the Council, and steps taken under the Act to have the houses repaired.

424. The Report deals with Dairies and Cowsheds, all of which have been visited and inspected.

425. The Water supplies to the various villages throughout the District are dealt with in detail, the majority of which appear satisfactory. At Ilmington, however, where the upper part of the village is supplied with water under high pressure, DR. FINDLAY considers it would be a great improvement if the lower part of the village could also be put on the high-pressure system. Referring further to water supplies he says:—"The chief things I recommend to the attention of the Council are the water supply

at the upper part of Long Compton, where I believe that it will be necessary to lay a second main as mentioned above, as the only way to arrange a satisfactory supply to this part of the village, and also the supply at the Fountain at Upper Brailles, where the present supply is so liable to become polluted at any time."

423. Referring to Sewers he says:—"The work of replacing the old sewers with glazed pipes is still being carried out, whenever the existing ones become defective."

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
5,847	18·6	15·7	0·5	82

CASTLE BROMWICH.

427. The population, DR. BOSTOCK HILL considers the same as that of the previous year, namely 3,050.

428. The Birth-rate, 19·67, is rather lower than last year, and the lowest registered during the last ten years.

429. There were 33 deaths registered, giving a Death-rate of 10·81, a satisfactory figure. Of the 33 deaths, 10 occurred in persons aged 65 and upwards.

430. The Infantile Death-rate, which was high last year, has this year been reduced to nearly one half. Five deaths were registered, which gives an infantile mortality rate of 83, a fairly normal figure for a Rural District.

431. As regards Zymotic diseases, no deaths occurred, although the following infectious Diseases were notified:—Scarlet Fever, 13; Diphtheria, 5; Erysipelas, 5.

432. Referring to Diphtheria, DR. BOSTOCK HILL states that this disease was a little more prevalent than in the previous year, 1 case being notified at Castle Bromwich, 2 at Water Orton, and 2 at Minworth.

Continuing he says:—"The case at Castle Bromwich was, in a way, particularly interesting, as it remained so long 'infective,' in other words remained a 'carrier' over a lengthy period, and a large number of swabs were taken in connection with it, owing to the difficulty of getting rid of the bacilli. Acting on my advice, your Council in the end decided to employ a nurse to look after this case, owing to the poverty of the parents and the difficulties of dealing with it, and it is satisfactory to be able to state that in about a fortnight swabs taken became negative, and the child was allowed to return to School."

Relating further to this case he adds:—"If it had not been for the County Council scheme, by means of which swabs may be taken by any practitioner and examined free of cost to the district or patient, this child would have been allowed to return to School, and almost certainly spread the disease among her schoolfellows."

433. No case of Typhoid Fever was notified during the year.

434. Measles, Whooping Cough and Mumps were not at all prevalent during the year and no Schools were closed on account of either of these diseases.

435. Three cases of Consumption were notified under the Order of the Local Government Board, two deaths being registered from the disease. DR. BOSTOCK HILL states that in both cases, the premises, clothes, and bedding were disinfected, and the rooms sprayed.

436. The Report deals with a case of alleged Ptomaine poisoning from Ice Cream, in which about a dozen people were affected, one case proving fatal.

Investigations were made but nothing definite could be found as to the cause of the outbreak.

437. As regards Water supply DR. BOSTOCK HILL states that 940 yards of 4-in. mains have been laid at Castle Bromwich and Water Orton, for the better supply of the district. Three samples of well water have been examined, found polluted, and condemned.

438. As regards sewerage, no new sewers were laid during the year. Several stoppages occurred in the syphon at Minworth, due, it was found, to substances like coke, pieces of wood and rags. The flushing of the sewers has been quite satisfactory.

439. Referring to Scavenging, DR. BOSTOCK HILL says:—"The scavenging arrangements which I was able to announce last year have worked quite satisfactorily, both at Water Orton and Castle Bromwich." He further states:—"Each of the populous parts of the district is now efficiently scavenged, but it may be desirable in the future to consider whether or not a public system of scavenging might be adopted in the Minworth and Curdworth districts."

440. With reference to Systematic Inspection under the Housing and Town Planning Act, DR. BOSTOCK HILL states that such inspection is no innovation in this district. The cottages, he reports, are fairly satisfactory, except at Minworth, where there still remain a fair number of privies and pan closets. He says:—"These are nearly all within reach of the sewer, and I hold it very desirable that in the present year measures should be taken to remove these receptacles for filth, which are quite out of accord with modern views of sanitation."

441. As regards Cowsheds and Dairies, the Inspector reports that he made 52 inspections, and issued 12 notices for abatement of nuisances found.

442. Reference is made in the Report to complaints of nuisances from the Sewage Farm of the Tame and Rea Drainage Board, and also from the Yardley District Council's Sewage farm.

DR. BOSTOCK HILL states that after repeated inspections he was unable to discover any cause in the laxity of management or carelessness in treatment on the Farm itself, he says:—"The nuisances at Water Orton will undoubtedly be less acute in the future, owing to the fact that the disposal of sludge in the neighbourhood of this village will, I think, be altered as regards its deposit." As regards Yardley he states that, owing to the recently installed filters, the condition of the River and of the Farm was at the end of the year apparently much better.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
3,050	19.67	10.81	Nil.	83

COVENTRY.

443. The population DR. ILIFFE estimates at 900, but he believes that before the end of this present year both the population and house accommodation will have increased enormously.

444. The very low Birth-rate of 11.11 is recorded.

445. The Water supply served by the City Authority of Coventry is reported good and sufficient.

446. Dust bins and a few earth closets are emptied once a week and removed to a neighbouring farm.

447. There were three cases of Scarlet Fever notified, and of these DR. ILIFFE says:—
“The cases of Scarlet Fever at Whitley and Pinley were compelled to be isolated in the homes in which they occurred, due to the Urban Authority being unable to provide beds for the patients.”

448. DR. ILIFFE states that systematic inspections both by himself and the Inspector have taken place.

449. Appended is a Summary of work done by the Sanitary Inspector.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
900	11·11	3·33	Nil.	100

FARNBOROUGH.

450. DR. TISDALL JOHNS, in his Report, states that the Birth-rate was 20·12 per 1,000, rather higher than last year.

451. Only 14 deaths were registered, giving a Death-rate of 9·09 per 1,000, the lowest recorded since 1902.

452. Two deaths occurred in children under one year of age, both from premature birth.

453. The only Infectious diseases notified were four cases of Scarlet Fever, three of these in one house.

454. Discussing the lack of Hospital accommodation for Fever cases, DR. JOHNS says:—
“Under the circumstances it was exceedingly fortunate there were no more cases from this source, and I hope the Council will make arrangements for dealing with such cases in the future, before there is another outbreak.”

455. Owing to the prevalence of Measles, Shotteswell School was closed at the beginning of the year.

456. DR. JOHNS states:—“There have been no cases of Tuberculosis reported to me during the year.

457. The Water supply is reported to have been satisfactory in the several villages of the District.

458. The Report also states that the Bakehouses, Dairies, Slaughter-houses, Workshops and Workplaces, Drainage and Sewage disposal, which is chiefly of the conservancy system, have been inspected.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
1,540	20·12	9·09	Nil.	64

FOLESHILL.

459. DR. JOHN ORTON estimates the population to be 20,116.

460. The Birth-rate was 34·1 per 1,000, the lowest recorded for the past ten years.

461. The Death-rate was 13·9, the lowest for the past ten years, comparing favourably with that of England and Wales.
462. The Infant Mortality is 112 per 1,000 births, the average for the past ten years being 135·9. Of these deaths DR. ORTON states Premature Birth still figures conspicuously, Bedworth claiming a large percentage.
463. The Zymotic death-rate, 1·3, is lower than it has been during the last four years. Altogether 28 deaths were caused by Zymotic diseases, viz.:—Scarlet Fever, 4; Diphtheria and Membraneous Croup, 5; Enteric Fever, 2; Measles, 0; Whooping Cough, 2; Epidemic Diarrhœa, 15.
464. No case of Small-pox occurred in this district during the year.
465. Scarlet Fever continued in epidemic form, 371 cases being notified. Of these, Bedworth claims 143 and Foleshill 167.
- Of these 371 cases, 333 were removed to Hospital. The mortality was very low, only 4 deaths being registered.
466. No deaths from Measles occurred during the year.
467. Epidemic Diarrhœa and Zymotic enteritis accounted for 20 deaths, 14 under one year of age. With reference to this DR. ORTON says:—"Of the 20 deaths, 13 occurred in Bedworth, 1 in Exhall, 5 in Foleshill, and 1 in Keresley. For a wet summer, this number is far too great, and one cannot help wishing that the abolition of middens and the accumulation of stable refuse could be further accelerated."
468. As regards Diphtheria and Membraneous Croup, 24 notifications were received, with 5 deaths. Eleven of the cases occurred in Bedworth, 10 in Foleshill, 1 in Exhall, and 2 in Walsgrave-on-Sowe.
469. Six cases of Enteric Fever occurred, 4 in Foleshill and 2 in Exhall, the two Exhall cases proving fatal.
470. Of Puerperal Fever, DR. ORTON says:—"Only one case was recorded, which was visited by me, and the house of the patient, and of the Midwife who was in attendance, were both inspected, together with all the appliances of the Midwife, and proper disinfection was carried out, and a Report forwarded by me to the County Medical Officer of Health."
471. As regards Tuberculosis, DR. ORTON reports that 26 deaths were registered under the heading of Pulmonary Tuberculosis and other Tuberculous diseases. In 1909 the number was 18; in 1908, 16, in 1907, 18; and in 1906, 26. Under the Regulations of the Local Government Board 2 notifications of pauper cases of Phthisis were received, both in Bedworth.
- Continuing he states:—"Upon the receipt of a post card kindly sent by the Registrar at a time when a death from Pulmonary Tuberculosis is registered, as soon after the funeral as possible, disinfection of the house and bedding is carried out by the District Council."
472. Speaking of Relapsing Fever, he states:—"One case was notified, and died of this disease, in the parish of Walsgrave. the premises were thoroughly disinfected."
473. During the year there have been 334 admissions to the Isolation Hospital from the District of Foleshill, one of these being a case of Enteric Fever, and under the agreement with Coventry Corporation 110 cases were admitted."

DR. ORTON remarks:—"Hard as the Nursing Staff worked at the Hospital last year, they have surpassed themselves during the year under review. The strain throughout the whole period has been continuous, and the capacity of the Hospital has been strained to its utmost to accommodate all the cases."

474. Commenting on the absence of a Common Lodging House in the District, DR. ORTON says that this certainly leads to overcrowding, and from the unsuitability of the houses for families to take in lodgers, the pernicious system is frequently resorted to of the bedrooms being occupied continuously, day and night. Continuing he says:—"It seems most desirable that properly supervised Lodging Houses should be encouraged, especially in the two parishes of Bedworth and Foleshill."

475. The Report deals with closure of Schools for Infectious diseases, all of which were properly disinfected as recommended by the County Medical Officer of Health, prior to re-opening.

476. With reference to Water supply, an additional supply was found necessary for Bedworth. A scheme has been adopted by the Council of obtaining this supply from the Newdigate Colliery.

The Foleshill supply from the North Warwickshire Water Company is reported as satisfactory in quantity and quality. DR. ORTON states:—"Since our last Report, the absence of Water at Hawkesbury Stop, which had so often been commented upon, has been remedied by the North Warwickshire Company continuing their mains there, and this District is now satisfactorily supplied."

That part of Exhall near the Lord Raglan Inn, and also the Council Schools and other properties in School Lane, have also been supplied by the North Warwickshire Company.

Referring to the Water supply at Walsgrave-on-Sowe, DR. ORTON reports:—"The population of this parish is now increasing rather rapidly, owing to many new houses having been erected, and the water for these is provided only from shallow wells. This, together with the presence of a privy and midden system, constitutes a serious menace to health, and it will shortly be urgent to provide some public supply for this parish."

477. The Report deals with the progress made in the Sewerage of Bedworth.

Reference is made to the extension of the sewer to Smorrell Lane, "where," DR. ORTON reports, "property belonging to the Newdigate Colliery Company, which has caused a considerable amount of trouble, has now been connected. We have, unfortunately, not been able to arrange for this latter property to be provided with water closets."

The Report further states that arrangements have been made with the Nuneaton Rural District Council whereby a number of the houses in the parish of Astley can be connected with the sewer in this district.

The Coventry City Council have also allowed houses in Chapel Lane, Foleshill, to be connected to the City sewer.

With reference to Keresley DR. ORTON reports:—"The scheme mentioned in my last Report, for dealing with the sewage of the Heath End of Keresley, which entailed the acquisition of land for irrigation, has been adopted.

"Complaints having been received in regard to pollution of farmers' cattle ponds at Lower Green, Keresley, a meeting of your Surveyor, Sanitary Inspector and myself,

together with the owner and tenants was held upon the ground, and it was decided to build a filtering tank, which it was hoped would purify the small stream of laundry waste. This plan has now been carried out and should prove sufficient..”

478. With reference to Scavenging in Bedworth and Foleshill, DR. ORTON suggests the provision of a Destructor. Continuing he says:—“During the year much complaint has been made of the unsatisfactory way in which the Foleshill contractor has carried out his work. During the last few weeks of the year the work has been much more satisfactorily carried out.”

“EXHALL.—Your Council has finally obtained, by resolution, an Order from the Local Government Board, constituting Exhall a special Scavenging Area; and a contractor has been appointed to carry out the necessary work, which, so far, has been excellently done.”

479. Slaughter-houses appear satisfactory, and no report of any diseased carcase has been received during the year.

480. In dealing with Cowsheds, Dairies, and Milk Supply, DR. ORTON believes that the milk-sellers take proper precautions in regard to the cooling, storage and conveyance of their milk to its destination, and the Dairies seem, on the whole, very satisfactory. He adds:—“In regard to the quality of the milk, it seems a pity that we have no longer the power, as formerly, to have samples analysed at the expense of the County, such power being now vested in the County Weights and Measures Inspector.”

481. Mention is made of the work being done under the Housing and Town Planning Act. Although the necessary notices have been served on the owners of several lots of dilapidated property, DR. ORTON emphasises the fact that the work is being very tardily carried out.

482. Appended to the Report is one from the Sanitary Inspector, on the sanitary work carried out by him during the year.

483. He states that, in connection with the Scarlet Fever epidemic, 340 visits have been made.

484. Dealing at some length with the drainage of the houses of Bedworth and Foleshill he says:—“It is now satisfactory to be able to report, that, in each of these parishes there are few owners of property not now connected with the main Drainage Scheme.

485. With reference to Scavenging, MR. WINDASS, the Sanitary Inspector draws attention, in his Report to complaints received with regard to the parishes of Foleshill and Bedworth. He states:—“In Bedworth the complaints have arisen, not through the neglect in emptying the ashpits and privies, which are now rapidly becoming a thing of the past, but the irregular way in which the ashbins are emptied, and in Foleshill with regard to the carelessness of the contractor.”

He considers that the removal and disposal of ashbin refuse in Foleshill and Bedworth has become a very serious question. Continuing he states:—“A large portion of the population consists of miners, who receive certain amounts of coal from the various pits, as a portion of their earnings. Consequently they are not so careful as they otherwise would be if they had to purchase their coal; with the result that, unless the emptying of the ashbins is carried out with the strictest regularity, a nuisance arises from their overflowing, heaps of ashes having to be placed anywhere at the backs of the premises.”

486. Twenty-six cases of over-crowding have been dealt with during the year. Mr. WINDASS finds great difficulty in dealing with this matter owing to the absence of Common Lodging Houses in the District.

He quotes one case in Bedworth where the occupier of a house was fined for over-crowding and ultimately committed to prison for seven days.

487. The Report deals with Bakehouses, Slaughter-houses, Canal Boats, Offensive Trades and Cowsheds, Dairies, Milkshops, etc. With reference to the latter he states that four formal complaints have been made, and in each case the necessary improvements have been carried out.

488. Under the Housing and Town Planning Act, notices were served in respect to 4 houses at Bedworth and 3 at Keresley. As the work was not carried out satisfactorily, he says:—"Closing Orders were served in respect of each of the seven houses; and I am pleased to say that, although the work is proceeding somewhat slowly, some steps are being taken to put the premises into a more sanitary condition."

He also reports that some houses which constituted a nuisance have been demolished, and also that notices have been served upon the agents of property in Court House Green, and that this work is at present being carried out,

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
20,116	34.1	13.9	1.3	112

MONKS KIRBY.

489. DR. O'CONNOR estimates the population to have further decreased to 1,480, but the estimate is based on the hypothesis that the inter-censal rate of decrease has been maintained. This will be either verified or disproved in the course of a few weeks.

490. The Death-rate was 1.2 per 1,000 lower than the previous year, the Birth-rate being considerably higher, in fact DR. O'CONNOR states that the birth-rate is the highest since 1905, while the death-rate, though lower than that of the previous year, is practically identical with the mean for the last ten years.

491. There was no Zymotic death-rate and no death from Phthisis, nor has any notification of consumption been received.

492. Only 3 cases of Infectious Disease were notified, namely, Diphtheria, 2; Scarlet Fever, 1.

493. Owing to the fact that no Hospital was available at this time in the District, though Monks Kirby is included in the Rugby Joint Hospital District, the case of Scarlet Fever was isolated in the Cricket Pavilion.

494. DR. O'CONNOR states that owing to the General Order of the Local Government Board as to Medical Officers of Health's Reports, he includes in this Report particulars as to Water Supply, Drainage, Sewerage, Sewage Disposal, Pollution of Rivers or Streams, and closet accommodation.

495. Referring to the Water supply of the villages, he says:—"One of your principal duties arising out of the inspections presently to be commenced under the Housing (Inspection of District) Regulations, will be to take efficient steps for the protection of wells from contamination, and I must therefore point out that the principal source of pollution in a large proportion of these cases is the existence of privy pits in proximity

to wells, or sufficiently close to cause contamination. These pits are on sanitary grounds impermissible. Their day has passed, and the Housing Regulations, if properly administered, should give them their quietus. I have now to put it to you that the abolition of these pits in your three larger villages, with the substitution of pans or earth closets, or other permissible sanitary convenience, is a condition precedent to effective administration of the Regulations. I cannot myself advise the abolition of a single pit unless I am satisfied as to the provisions which are made or available for the disposal of the contents of the pan and sanitary dustbin, by which it would as a rule be replaced."

496. He refers to the importance of Scavenging, particularly in the villages of Monks Kirby, Pailton, and Stretton-under-Fosse.

497. Referring to the Scavenging of the village of Monks Kirby, he says that owing to the absence of any system of scavenging, the contents of many of the pails are thrown on to the gardens, close to wells or back doors.

498. He calls attention to the pollution of a ditch by sewage at Monks Kirby. He points out how this might be remedied and says:—"I would direct attention to the necessity for protecting the river from pollution."

499. There are no factories and no out-workers in the district and only five workshops, four of which are bakehouses.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Lymotic Death-rate.	Infant Mortality per 1,000 Births.
1,480	23·6	10·8	Nil	Nil

NUNEATON.

500. DR. WOOD says that the Birth-rate is 2.7 less than the previous year, but the Death-rate is a very good one, namely, 8.6 per 1,000, compared with 14.2 in the previous year, and is the lowest death-rate of the District which DR. WOOD has recorded.

501. Five deaths occurred in infants, which gives an Infant Mortality rate of 70.4 per 1,000 births, a very satisfactory figure compared with the previous year when it reached the terribly high figure of 185 per 1,000 births.

502. DR. WOOD suggests that the adoption of the Notification of Births Act should be considered by the Council.

503. There has been no case of Infectious disease, and only one case of Phthisis was notified, though two deaths were registered.

504. Referring to the Sewerage of the District, DR. WOOD says that septic tanks are being constructed at Gun Hill and Hill Top, instead of allowing the sewage to flow over the land. The care of the tanks is to be undertaken by the Council. Some dwellings known as Sunnysidings are to be demolished, so removing the risk of contamination of the adjacent stream.

505. Referring to the sewerage of Arley Village, DR. WOOD says:—"There is some difficulty in securing a suitable site for treatment of the sewage. The direction of the growth of population is now becoming more evident, and in my opinion a comprehensive scheme will have to be carried out in the near future."

506. He calls attention to the unsatisfactory nature of the scavenging of Arley, and says that this work should be undertaken by the Council, with which I entirely agree.

507. He also records that the Foleshill Rural District Council have agreed to receive and treat sewage from houses adjoining that district.

508. Plans for 14 houses at Arley have been passed, and 10 wooden houses there are to be demolished.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
2,435	29·1	8·6	Nil	70

STRATFORD-ON-AVON.

509. DR. THOMPSON announces that the population has neither increased nor decreased during the past ten years,

510. The Birth-rate was 21·3 per 1,000.

511. The Death-rate was remarkably low, viz., 11·6.

512. The Infantile Death-rate was 48·6 per 1,000 births registered.

513. Only one death from notifiable Zymotic Disease was registered, and that was from Diphtheria.

514. As regards Searlet Fever, DR. THOMPSON reports a limited outbreak in Ullenhall, involving also Henley-in-Arden. Seventeen cases occurred, seven of these in the latter District. He also reports fourteen cases at Hampton Lucy during July, and four in October.

He says:—"I think it probable that the work of Health Visitors will, in future, lessen the extent to which Searlet Fever spreads from individual cases, which are overlooked, or which are wilfully concealed; and, personally, when an epidemic of this disease breaks out, I should like, beyond everything, as a means of suppression, to have a Health Visitor engaged in her work at the site of outbreak."

515. As regards Diphtheria, there were four cases notified, one terminating fatally.

516. In dealing with the question of Sewerage and Drainage, DR. THOMPSON states, in reference to the sewerage of Henley-in-Arden:—"It is now proposed to carry the main sewer beyond this present site of disposal down through the village of Wootton Wawen, and to deal with the combined sewage of Wootton and Henley by Sewage Disposal Works at a point south of Wootton village."

"Wellesbourne Sewage Disposal Works are now in course of construction, and when completed and connected up with the houses by modern sewers and house drainage that part of the District will be in a fair way of attaining the standard of sanitation your Council aim at applying generally."

"Kineton Sewage Disposal Works are, I understand, to be extended to allow of less work being thrown on the existing filter beds, and the present tank storage capacity is to be decreased to lessen the time the sewage now takes to pass through the tank."

517. DR. THOMPSON reports that the public water supplies of the District continue satisfactory. He states that Kineton has improved its supply by taking in springs at Pittern Hill.

Speaking of the successful boring at Morcton Morrell, he says:—"Consequently it could be similarly bored for a water supply for Wellesbourne with an almost certainty of success at 600 to 800 feet."

518. With reference to Tuberculosis, DR. THOMPSON says:—"I hope to be able to report to your Council shortly that the Medical Practitioners of the District are in favour of notification of Tuberculosis, and that this will be adopted.

Continuing he states:—"To make satisfactory headway in preventing the spread of Pulmonary Tuberculosis, some means seems essential in dealing with the houses of non-pauper cases in cottages where the cubic space is barely sufficient for the inmates, and yet technically not overcrowded. Under such circumstances the benefit arising from a stay in a Sanatorium is liable to be undone when a patient returns home, and it is to be hoped that when a County Sanatorium is instituted, there will be some means of guaranteeing that these cases, after Sanatorium treatment, will be put in the way of using 'Shelters' erected at their homes."

519. Under the Housing and Town Planning Act, DR. THOMPSON says that so far the actual condemning of any property as unfit for habitation has not been necessary.

Referring to the large amount of work done during recent years in improving existing dwellings, DR. THOMPSON says:—"Henley-in-Arden is notably a place that has much improved, and is a marked example of the fact that the introduction of a public water supply and good sewerage is liable to be accompanied by a general improvement all around."

In dealing further with the question of building, DR. THOMPSON strongly advocates "sash" windows in bedrooms, in place of those that open outwards on hinges.

520. The mortality returns shew eight deaths registered from Pulmonary Tuberculosis, and one from other Tuberculous diseases:—Whooping Cough, 2; Diphtheria, 1; Epidemic Influenza, 3; and Enteritis, 2.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
10,589	21·3	11·6	0·2	48·6

TAMWORTH.

521. The population, DR. FAUSSET estimates to be 14,975.
522. The very satisfactory Birth-rate of 32·5 is recorded.
523. The Death-rate was 11·4 per 1,000, slightly lower than last year.
524. Forty deaths were registered of children under one year of age, giving an infant mortality rate of 81 per 1,000 births. This is a considerable improvement on previous years. Of the 40 deaths, 21 were of infants who died within four weeks of birth, and fifteen within a week of birth. Two were due to diarrhoeal disease and four to pneumonia.
525. The rather high Zymotic death-rate of 1·2 is reported, eighteen deaths being registered as follows:—Measles, 3; Scarlet Fever, 4; Whooping Cough, 2; and Diphtheria 9.
526. Pulmonary Tuberculosis accounted for 5 deaths.

527. The large number of 246 cases of Scarlet Fever were notified, and 148 removed to the Isolation Hospital. DR. FAUSSET says:—"All the homes were visited, and enquiries made into each case, disinfectants were supplied, disinfection and cleansing of the infected rooms carried out, and precautions taken to prevent any spread of the disease."

Continuing he says:—"Four fatal cases occurred of the large number attacked with this disease, which, on the whole, was of rather a mild character."

528. Thirty-one cases of Diphtheria were notified during the year, the majority of the cases occurring in the Kingsbury District. The disease was centred for some time in one street of 75 cottages close to the Kingsbury Colliery, where 15 cases were notified.

DR. FAUSSET reports:—"Great difficulty was experienced in getting rid of the infection here and in the other parts of the parish, the last case being notified in the month of April. All the houses here and at Bodymoor Heath were frequently visited, and numerous inspections made, and swabs of throat secretions of contacts, and cases of suspicious sore throat, and of apparently healthy children were taken and forwarded to the University of Birmingham for bacteriological examination."

529. The drains at the Kingsbury School were found defective and remedied, the School meanwhile being closed.

530. Measles was epidemic at Austrey and Glascote, where three fatal cases occurred.

531. Mumps was very prevalent in Newton Regis and other parts of the district, the School being closed for a month on that account.

532. The Report deals at length with Sanitary improvements effected in the constituent parishes. With reference to Kingsbury district, mention is made of a special report on the sanitary arrangements, closets and drainage of Piccadilly, resulting in the fixing of a 60 gallon flushing tank at the head of each of the main drains of these four blocks of houses, and the erection of five ventilating shafts of 6-inch diameter.

533. At Turf Terrace, Hockley, seven old privy middens were abolished and replaced by thirteen W.C.'s and drains entirely relaid.

534. Referring to the Isolation Hospital, in which 225 patients were treated during the year—Diphtheria, 20; and Scarlet Fever, 205, DR. FAUSSET says:—"There has been a very considerable increase in population during the past seventeen years, and in order to gain the best results by having a Hospital fully equipped for the isolation and treatment of infectious diseases more accommodation should be provided."

This is a question, he considers, requiring the serious consideration of the Joint Hospital Board.

535. He also states that Well-Carn Cottage is kept always in readiness for the reception of Small-pox cases, should such occur: in either the Borough or the Rural District.

536. With regard to Water Supply, the parishes of Amington and Stoncydelphi, Bolehall and Glascote, and Wilnecote and Castle Liberty, also part of Shuttington and Dosthill derive a constant and plentiful supply from the Tamworth and District Water Works. The village of Kingsbury and the hamlets of Bodymoor Heath, Cliff, Coton, and Halloughton are supplied by gravitation from the reservoir fed by the Dumble Springs. Hurley, Hurley Common, Edge Hill and Whateley are supplied by arrangement with the Dugdale Trustees from their well at Baddesley. Of this latter supply DR. FAUSSET says:—"As stated in my Annual Report for last year, it was with regard to this supply

that complaints had been made by the consumers as to its unfitness for drinking or cooking purposes, the water being at times of a reddish colour, due to the quantity of suspended matter, chiefly ferric oxide, contained in it; and that your Council, in conjunction with the Atherstone Rural District Council, had commenced negotiations with the Dugdale Trustees, with a view to obtaining such an improvement in the supply as would make the water pure and wholesome. These negotiations are still pending.

537. Extensions of the water main have been made at Woodhouse Lane, Amington, at Belgrave Road, Wilnecote; and at Bodymoor Heath, Kingsbury; for the supply of Broomycroft Farm and five cottages on the canal side.
538. In dealing with the question of Sewerage and Sewage Disposal, reference is made to the new Joint Sewage Disposal Scheme. DR. FAUSSET says:—"It is a matter of great satisfaction to be able to report that the works were finished and the scheme completed during the year."
539. The Report also contains a description of the New Sewage Disposal Works, now in operation at Wood End, in the Kingsbury parish.
540. At Dosthill, the laying of a new 12-inch sewer has been recommended by the Surveyor.
541. With reference to the removal of the Injunction granted in the case of the Attorney General v. Birmingham Tame and Rea Drainage Board, it is reported that the Rural District Council, in conjunction with the Borough Council, appealed to the House of Lords in the Autumn.
542. As regards New Buildings, etc. DR. FAUSSET says:—"The erection of new houses and cottages has been fully maintained, and they are very quickly tenanted."
543. The Report deals with Factories and Workshops, and states that at one factory the providing of greater facilities in case of fire is under consideration. In two instances work by outworkers was stopped on account of infectious disease.
544. Five deaths occurred from Pulmonary Tuberculosis, two of which were notified under the voluntary notification scheme. Referring to this subject, DR. FAUSSET says:—"As mentioned in previous reports, the cases notified or discovered are visited and advised as to the best methods of fighting the disease, the importance of good ventilation and fresh air indoors insisted upon, and the advantage of open-air treatment, as well as the preventive measures to be adopted by other members of the family pointed out. Parchment sputum cups have been provided, and leaflets bearing on the disease distributed."
- Further he states that in fatal cases thorough disinfection of the house is carried out, the cost being divided between the owner and the District Council.
545. Referring to bacteriological examinations in cases of Diphtheria, Enteric Fever, and Pulmonary Tuberculosis, conducted by the University of Birmingham, DR. FAUSSET says:—"Free use was made by the Medical Practitioners of the district of the privileges afforded by this arrangement instituted by both the County Councils of Stafford and Warwick."
546. He comments upon the inefficiency of vaccination in the district, Exemption Certificates being very much on the increase.

547. He reports some sanitary improvements in the Dairies, Cowsheds, and Milkshops in the District. Referring to the purity of Milk he says:—"The lives of so many infants, young children, and invalids depend so much on Milk for their nourishment, that every precaution should be taken to insure its purity and freedom from tubercle bacilli, and the most effective way to insure this would be to have veterinary inspection combined with the bacteriological examination of the milk."

548. With reference to the Housing, Town Planning, etc., Act, DR. FAUSSET reports:—"It was late in the year before everything was in readiness to take any proceedings under the Act; one cottage was, however, closed as unfit for human habitation, and four others are being dealt with."

549. DR. FAUSSET comments on the Medical Inspection of School Children, and on the work accomplished by Health Visitors. Of this he says:—"In the Warwickshire parishes the work carried on so successfully by Miss Morrison has been taken up by Miss Houghton, Health Visitor, School Nurse, and Inspector of Midwives, and much benefit is likely to arise from her visits to the homes of the people as regards advising the mothers on matters connected with the proper management and care and feeding of infants and young children, and on other matters affecting their health, such as personal cleanliness, and the hygiene of the home."

Continuing he says:—"When the Notification of Births Act is adopted, full advantage can be taken of it by the Health Visitors in a way which is not possible at present."

550. In conclusion he says that there are at least five important questions which will require careful attention during the present year, viz.:—

1. The continuation of the measures already undertaken with regard to the prevention of pollution of the River Tame.
2. The carrying out of the remainder of the scheme for dealing with the weirs.
3. The administration of the powers of the Housing and Town Planning Act.
4. The carrying out of the work connected with the laying of the new sewer at Dosthill, and for the efficient treatment of the sewage.
5. The revision of the Bye-laws.

551. Appended is a detailed and very satisfactory Report by the Sanitary Inspector of the work carried out in his department during the year.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
14,975	32·5	11·4	1·20	81

RURAL DISTRICTS IN THE MID-WARWICKSHIRE COMBINED DISTRICT, INCLUDING
MERIDEN, RUGBY, SOLIHULL, SOUTHAM AND WARWICK.

MERIDEN.

552. The population, DR. TANGYE estimates, at 12,150.
553. The Birth-rate of 20·7 per 1,000 is rather below the average for the past ten years.
554. One hundred and fifty-six deaths were registered, giving a Death-rate of 12·8 per 1,000.
555. The Infant Mortality was 60 per 1,000 births. Premature Birth accounted for 5 deaths; Wasting Diseases, 3; Convulsions, 3; and Whooping Cough, 1.
556. The Zymotic Death-rate was 0·17 per 1,000.
557. Nine deaths were due to Phthisis, and two to other Tuberculosis diseases.
558. Fifty cases of Infectious disease were notified, as compared with 28 the previous year. These consisted of:—Scarlet Fever, 39; Diphtheria, 8; Erysipelas, 3.
559. The increase in Scarlet Fever was no doubt due to the prevalence of that disease in the neighbouring Districts of Coventry and Foleshill.
560. The cases of Diphtheria occurred singly throughout the District, with the exception of two cases at Nether Whitacre. One fatal case occurred at Lea Marston.
561. DR. TANGYE says:—"On October 1st, the new Solihull and Meriden Joint Isolation Hospital was opened for the reception of Scarlet Fever, Diphtheria, and Typhoid, and the arrangement for the admission of patients from the District to the Coventry Isolation Hospital was discontinued."
562. Under the Public Health (Tuberculosis Regulations, one notification was received from the Derby Union of a Phthisis patient travelling to the Meriden Union Workhouse.
563. The Report also deals with outbreaks of Infectious disease amongst School Children.
564. Appended is a very satisfactory Report from the Surveyor and Sanitary Inspector.
565. With reference to Public Works, he says:—"The 9-inch sewer at Allesley has been extended 570 yards, with the necessary man-holes, lamp-holes, and ventilating shaft. The 9-inch sewer at Coleshill has been laid for a distance of 943 yards, with the necessary man-holes, and two settling tanks have been constructed at the outlet at what is known as the 'Hornets,' for the purpose of intercepting the solid matter before the sewage is dealt with on the land."
566. The Report also deals with Water Supply, Slaughter-houses, Dairies and Cowsheds, Factories and Workshops, etc.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
12,150	20·7	12·8	0·17	60

RUGBY.

567. DR. TANGYE estimates the population at 16,980.

568. The Birth-rate was 23·9 per 1000.

569. The satisfactory Death-rate of 13 per 1,000 is recorded, which is below the average for the past ten years.

570. The Infant Mortality was 80 per 1,000 births, considerably lower than the average for the previous ten years.

Of the deaths under one year of age, Measles accounted for 6; Whooping Cough, 2; Pneumonia, 9; Premature Birth, 5; and Diarrhœa, 1.

571. The only death due to notifiable infectious disease was one of Diphtheria.

572. The high Zymotic death-rate of 1·12 per 1,000 was due largely to the deaths from Measles, which numbered 13, the other Zymotic deaths being:—Whooping Cough, 3; Diarrhœa, 2; and Diphtheria, 1.

573. Fifteen deaths occurred from Phthisis, and five from other Tuberculous diseases.

574. Forty-five cases of infectious disease were notified:—Diphtheria, 16; Scarlet Fever, 14; Erysipelas, 10; Typhoid Fever, 4; and Puerperal Fever, 1.

575. Referring to Diphtheria, DR. TANGYE says:—"The 16 cases of Diphtheria were distributed as follows:—5 at Clifton, 3 at Newton, 4 at New Bilton, and 2 each at Brandon and Princethorpe. The cases at Clifton and Newton occurred in October in connection with rather a widespread epidemic of infectious sore throat amongst the children attending the Clifton School. After consultation with the School Medical Officer, it was decided to close the School, and a thorough disinfection was carried out by the Sanitary Inspector.

"The various cases of infectious throat and Diphtheria were carefully followed up, and no child was allowed to return to School, until a swab from the throat was reported to be free from the Diphtheria organism by the Birmingham University. Since the re-opening of the School early in November, no further case has been notified in that part of the District."

576. The Scarlet Fever cases were more or less scattered throughout the District.

577. The four cases of Typhoid Fever were in no way associated, one having probably contracted the disease outside the District—none proved fatal.

578. Under the Public Health (Tuberculosis) Regulations, two notifications were received. In one case, which proved fatal, disinfection was carried out.

Disinfection was also carried out at a house vacated by a Phthisical patient, who went from New Bilton to the Rugby Union Workhouse.

579. DR. TANGYE mentions in the Report, a number of Schools that were closed for variable periods on account of outbreaks of Infectious disease.

580. With reference to Sewerage the Surveyor states:—"The Sewerage Works for Old Bilton, sanctioned by the Local Government Board, and referred to in the last Report, are well advanced, and will be completed within a few days."

Continuing he says:—"A new streaming filter, with rotating spreader, has been erected at New Bilton Outfall Works, to deal with a portion of Bilton effluent."

581. He also states that Hillmorton is shortly to be supplied with water from the Urban District Council, to be distributed through the village by stand pipes and private services.

582. Appended is a Report from the Sanitary Inspector, who states that 208 nuisances have been abated.

583. Further he states, with reference to Unsound Food:—"Two beef carcasses, 1 pig carcase, 43½-lbs. of livers, and 13½ lbs. of veal were voluntarily surrendered and destroyed."

584. Referring to Water supply, he states that 23 samples of water were submitted for analysis, and 13 reported to be unfit for drinking purposes.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
16,980	23·9	13·0	1·12	88

SOLIHULL.

585. DR. TANGYE estimates the population at 18,080.

586. The Birth-rate of 20·2 per 1,000, is slightly higher than last year.

587. The Death-rate was 13·1 per 1,000, rather higher than the average for the past ten years.

588. The Infant Mortality of 79 per 1,000 births, is slightly higher than last year.

Of the 29 deaths under one year of age, 13 were due to Premature Birth, Congenital Defects, and Injury at Birth, and 6 to various forms of Tuberculous disease, and only two to Diarrhoea.

589. Scarlet Fever accounted for 4 deaths, and Diphtheria 2, the Zymotic death-rate being as low as 0·50 per 1,000.

590. The high Phthisis mortality of 0·94 per 1,000 is reported, 17 deaths being registered from Phthisis alone. Six deaths were also registered from other Tuberculous diseases, giving a total of 23 deaths, or a rate of 1·27 per 1,000.

591. The following Infectious diseases were notified during the year:—Scarlet Fever, 92; Diphtheria, 59; Erysipelas, 11; and Puerperal Fever, 3. No case of Typhoid was notified during the year.

592. Referring to the outbreaks of Diphtheria and Scarlet Fever, DR. TANGYE says:—"The first outbreak of Diphtheria occurred at the Union Workhouse, Solihull, where, on July 23rd, four cases were notified immediately after admission from the Rural District of Yardley.

"Early in November 9 other inmates became infected from the original cases, and matters assumed a serious aspect, as no proper isolation could be arranged at the Infirmary. At a special meeting of the Committee of the Solihull and Meriden Joint Small-pox Hospital it was decided, in view of the emergency which had arisen, to lend that Hospital for the accommodation of these cases from the Workhouse.

"Towards the end of February an outbreak of Scarlet Fever occurred at the Workhouse, and it was considered that some of these latter cases were in reality also infected with Diphtheria, it was judged wise not to send them into the Solihull and Yardley Joint Scarlet Fever Hospital; indeed, this Hospital had not sufficient accommodation available at the time. Thirteen cases of Scarlet Fever in all were notified from the Workhouse, and were isolated as well as could be managed in that institution. Immediately after these further cases had occurred at the Workhouse, 7 of the original 13 cases of Diphtheria at the Small-pox Hospital developed typical Scarlet Fever, a fact that bears out the opinion that the infection was mixed from the first."

Continuing he says:—"The utter unsuitability of the Infirmary for the reception and treatment of Infectious diseases was amply demonstrated, and I understand that this practice is finally abandoned, the opening of the new Solihull and Meriden Joint Infectious Hospital for Scarlet Fever, Diphtheria, and Typhoid, rendering such a course unnecessary as far as Solihull is concerned."

593. The Report also deals with an outbreak of Diphtheria at the Midland Counties' Asylum, Knowle, where in February 12 cases were notified. Active measures were taken by DR. TANGYE and the Medical Officer, DR. HOLICK, to trace the infection by bacteriological means, and a large number of swabs from the throats of suspects and contacts shewed that they were harbouring virulent diphtheria bacilli.

Various sanitary defects were also rectified throughout the establishment.

A fresh outbreak of 6 cases occurred in November and December, similar methods being employed to cope with the disease.

Continuing DR. TANGYE says:—"At the time of writing this Report, the measures taken appear to have been most successful, and the Asylum staff are to be congratulated on the result of their efforts."

594. Of the three cases of Puerperal Fever, two proved fatal. Two of the cases were attended by registered Midwives, the other by an unregistered person acting for a practitioner in charge of the case.

595. Ten cases of Phthisis in poor persons were notified, only four, however, belonging to the District.

596. With reference to the new Solihull and Meriden Joint Isolation Hospital, DR. TANGYE states that it was opened on October 1st.

The accommodation is for 14 cases of Scarlet Fever, 8 of Diphtheria, and 6 of Typhoid, also four single-bed observation wards.

DR. TANGYE says:—"There can be no doubt that the new Hospital will prove of the greatest value to the two Districts concerned, built and equipped, as it is, on the most modern and hygienic plan."

597. With reference to the Solihull Sewerage Scheme, the Surveyor reports that almost 7 miles of sewers have been laid, and he hopes by the end of the year to have the major part of the works completed and some house connections made.

598. Appended is a Report from the Sanitary Inspector, in which he states "inter alia" that 40 cases of Scarlet Fever and one of Diphtheria were removed to the Isolation Hospital.

599. He notes a marked improvement in the Dairies, Milkshops, and Cowsheds visited, and says that no case of infected milk supply had to be dealt with."

600. The Report also deals with Nuisances, Water Supply, Slaughter-houses, Canal Boats, etc.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
18,080	20·2	13·1	0·50	79

SOUTHAM.

601. The population, DR. TANGYE estimates at 10,060.
602. The Birth-rate was 24·5 per 1,000.
603. The Death-rate of 14·9 was slightly below the average for the past ten years.
604. There were 21 deaths of children under one year of age, the Infant Mortality being 85 per 1,000 births. Four deaths were due to Whooping Cough, 6 to Premature Birth and Congenital Defects, 2 each to Wasting Diseases and Pneumonia, and one to Diarrhœa.
605. Scarlet Fever accounted for one death; Diphtheria, 5; Typhoid Fever, 1. The Zymotic death-rate of 1·59 per 1,000 was the highest for the year in the Combined District.
606. The Phthisis death-rate of 1·19 per 1,000 is also high, 12 deaths being registered from that disease, and two from other Tuberculous diseases.
607. As regards Infectious Diseases, the following were notified:—Diphtheria, 23; Erysipelas, 9; Scarlet Fever, 6; and Typhoid Fever, 3.
608. Diphtheria was prevalent at Long Itchington, There three cases proved fatal. Infected scholars at the School were excluded, but closure was not found necessary. The other cases of Diphtheria were all visited and some sanitary defects remedied in connection with them.
609. Referring to the three Typhoid Fever cases, DR. TANGYE says:—"This latter case, and the case of Diphtheria at Ufton, led to my making special reports to the Council with reference to the questions of sewage and refuse disposal, as mentioned in the General Report for the Combined District."
610. Only two notifications of Phthisis in poor persons were received during the year.
611. In the appended Report of the Sanitary Inspector, it is stated that 205 nuisances have been dealt with.
612. New Main Drains have been laid in Bishops Itchington, Gaydon, Harbury, Napton and Ufton.
613. Of the 41 notified cases of Infectious disease, 7 treated at the Heathcote Hospital.
614. As regards Dairies and Cowsheds the Inspector states that it was necessary in a few cases to give notices chiefly with regard to cleanliness.

VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
10,060	24·5	14·9	1·59	85

WARWICK.

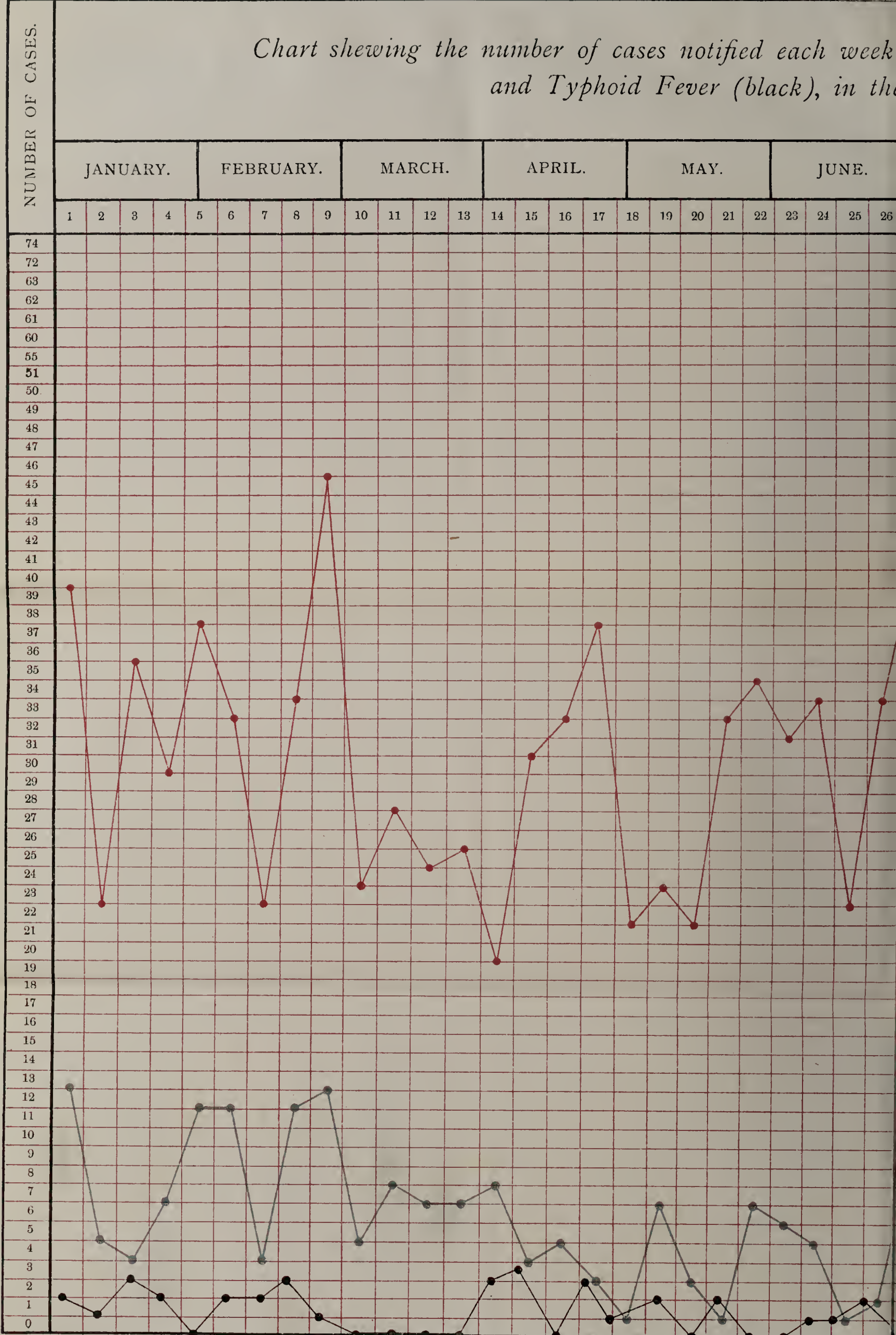
615. Dr. TANGYE estimates the population at 12,010.
616. The Birth-rate of 16·9 is considerably below the average for the previous ten years.
617. The Death-rate was 11·3 per 1,000, or 12·4 if the Asylum population be deducted. both figures being below the average for the past ten years.
618. The satisfactory Infant Mortality of 69 per 1,000 births is recorded, a considerable improvement on the average for the last ten years of 92·7.
- Of these deaths Pneumonia accounted for 5; Diarrhœa, 2; and Whooping Cough, 1.
619. The Zymotic death-rate was 0·58 per 1,000.
620. Ten deaths were due to Phthisis. Referring to this Dr. TANGYE says:—"I am glad to be able to record that thorough disinfection is carried out by the Sanitary Inspector in every case where a Phthisis patient has died in a private house, and also an arrangement has been made for removal of bedding in those cases of death for proper disinfection by the steam disinfector at the Union Workhouse."
621. Of the 38 notifications of Infectious disease, 16 were Scarlet Fever, 14 Diphtheria, 5 Erysipelas, and 3 Typhoid Fever.
622. With reference to the cases of Diphtheria at Hatton and Shrewley Dr. TANGYE states that they were followed up carefully, swabs taken, and the children were not allowed to return to School until reported free from infection by bacteriological examination.
623. Only one case of Phthisis was notified under the Public Health (Tuberculosis) Regulations.
624. Ashow School was closed in February on account of Measles, and Whitnash twice, for Mumps and Whooping Cough. Hatton and Leek Wootton Schools were also closed for Whooping Cough. Dr. TANGYE states, however, that there was less non-notifiable infectious disease amongst school children than in the previous year.
625. Appended is a Report from the Surveyor and Sanitary Inspector, in which he states that the number of nuisances dealt with, and sanitary improvements made, amount to 512.
626. Referring to the pollution of Whitnash Ditch by slop water from the north side of the village, he says:—"The old pipes were taken up and cleansed and partly renewed, three catchpits built on the line of pipes which was extended to a piece of land rented from the Allotments Association. The land was under-drained, and is now under cultivation, and no further complaint has been received from Leamington Corporation as to the state of Whitnash Ditch."
627. The Dairies and Cowsheds, he says, have been kept in very fair condition.
628. A new length of 6-inch sewer has been laid in Church Terrace, Cubbington. Sewers have been repaired, and flushed, and gullies placed in place of open catch-pits, at Cubbington, Barford, Whitnash, Offehurch and Bubbenhall.

629. Plans for the erection of 53 new buildings were approved by the Council.
630. Although the Housing, Town Planning, etc., Act has only been brought into force during the last month of the year, 20 inspections have been made, and 2 notices under Sec. 15 (3) have been served.

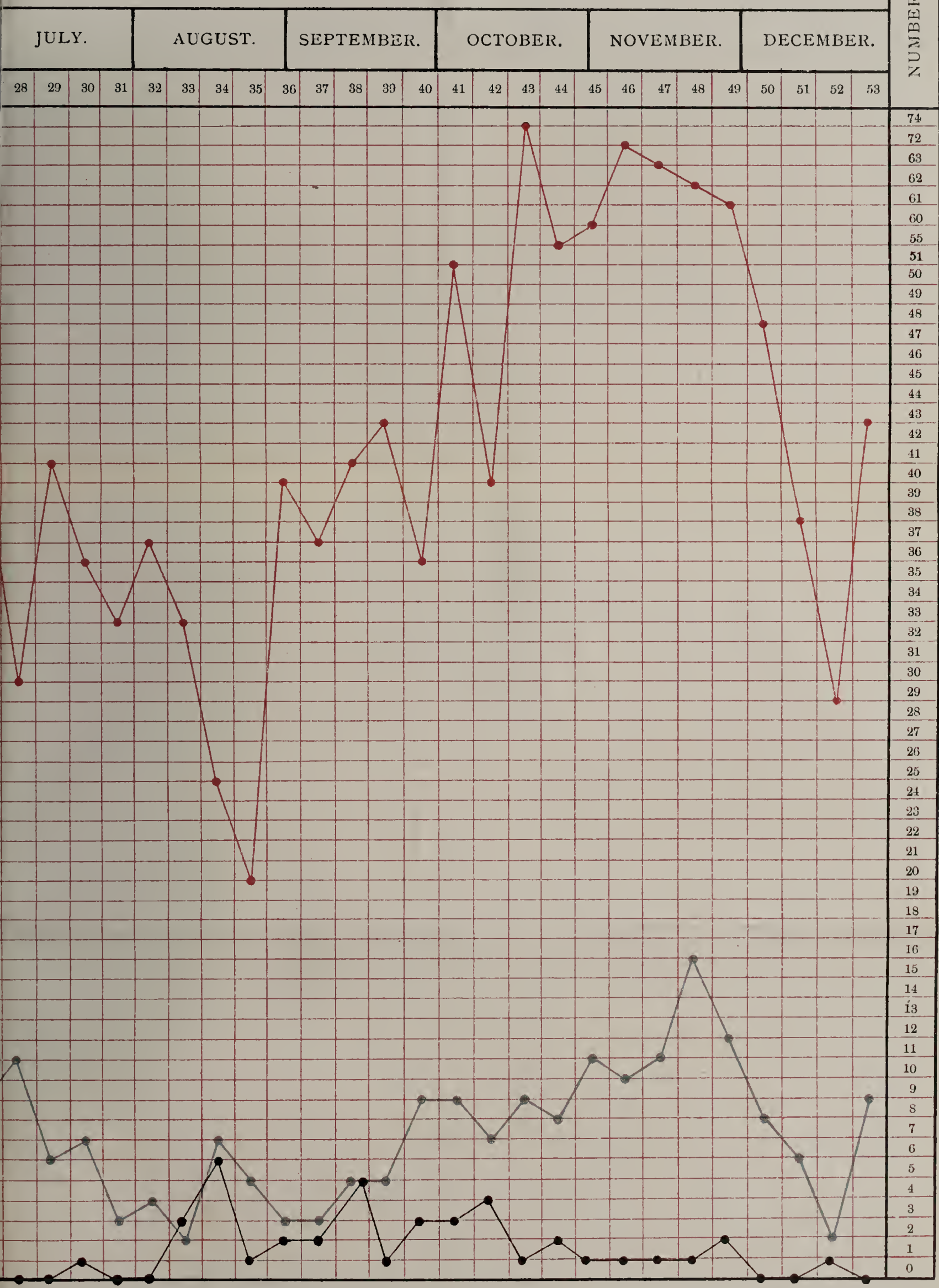
VITAL STATISTICS.

Population.	Birth-rate.	Death-rate.	Zymotic Death-rate.	Infant Mortality per 1,000 Births.
12,010	16·9	11·3	05·8	69

Chart shewing the number of cases notified each week
and Typhoid Fever (black), in the



the year of Scarlet Fever (red), Diphtheria (blue),
administrative County in 1910.



D. TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS coming to the knowledge of the Medical Officers of Health during the year 1910, in the URBAN SANITARY DISTRICTS of the COUNTY OF WARWICK,

classified according to Diseases, Ages and Localities.

DISTRICTS.	POPULATION AT ALL AGES.		Registered Births.	CASES NOTIFIED AT SUBJOINED AGES.						NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH										NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITALS.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
	Census 1901.	Estimated to middle of 1910.		At all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Smallpox.	Cholera.	Diphtheria.	Membranous Group.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Chicken Pox.	Smallpox.	Cholera.	Diphtheria.	Membranous Group.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Plague																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
ASTON MANOR	77,316	86,269	1,998	581	9	153	296	45	73	5	..	45	..	56	447	..	26	..	7	7	366

E. TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS coming to the knowledge of the Medical Officers of Health during the year 1910, in the RURAL SANITARY DISTRICTS of the COUNTY OF WARWICK,
classified according to DISEASES, AGES, AND LOCALITIES.

DISTRICTS.	POPULATION AT ALL AGES.		Registered Births.	CASES NOTIFIED AT SUBJOINED AGES.						NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH										NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITALS.																	
	Census 1901.	Estimated to middle of 1910.		At all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Smallpox.	Cholera.	Diphtheria.	Membranous Group.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Chicken Pox	Smallpox.	Cholera.	Diphtheria.	Membranous Group.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Plague			
ALCESTER ..	11,392	11,400	258	45	1	7	23	3	5	1	..	1	..	5	39	1	39
ATHERSTONE ..	16,356	18,810	589	356	5	132	167	22	30	..	..	10	..	16	320	..	..	8	..	..	2	..	..	..	..	..	..	141	..	1	..	..	..	..	..	..
BRAILES ..	6,323	5,847	109	7	..	1	2	1	3	..	..	..	..	2	5	..	..	..	..	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..
CASTLE BROMWICH	2,743	3,050	60	23	..	2	8	6	6	1	..	5	..	5	13	..	..	..	..	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..
COVENTRY ..	318	900	10	3	..	..	3	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
FARNBOROUGH ..	1,540	1,540	31	6	..	1	3	..	..	..	..	..	..	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
FOLESHILL ..	17,002	20,116	687	424	6	149	218	25	24	2	..	24	..	21	371	..	..	6	1	..	1	..	..	..	..	..	333	..	1	..	..	..	..	..	..	..
MERIDEN ..	11,347	12,150	251	50	..	16	21	6	7	..	..	8	..	3	39	..	..	..	..	..	..	..	..	1	..	..	18	..	..	..	..	..	..	..	..	..
MONKS KIRBY ..	1,581	1,480	35	3	..	..	..	1	2	..	..	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
NUNEATON ..	1,574	2,435	71	1	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
RUGBY ..	15,214	16,980	407	45	1	5	22	2	14	1	..	16	..	10	14	..	..	4	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
SOLIHULL ..	14,673	18,080	366	165	..	35	91	21	15	3	..	59	..	11	92	..	..	..	..	3	..	..	..	14	..	..	40	..	..	..	..	..	..	..	..	..
SOUTHAM ..	9,903	10,060	247	41	..	7	17	2	15	23	..	9	6	3	5	2
STRATFORD-ON-AVON	10,606	10,589	226	43	1	9	24	2	7	4	..	4	35	3	34
TAMWORTH ..	12,586	14,975	488	283	..	88	170	14	11	32	..	5	246	19	152
WARWICK ..	11,585	12,010	204	38	..	6	17	6	9	14	..	5	16	3	12	11
TOTALS..	144,743	160,422	4,039	1,533	14	458	791	111	149	8	..	198	..	99	1204	..	..	24	1	..	7	..	..	55	..	781	..	2	..	..	..	..	..	..	..	..

F. TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS coming to the knowledge of the Medical Officers of Health during the year 1910, in the COUNTY OF WARWICK, classified according to DISEASES, AGES, AND LOCALITIES.

DISTRICTS.	POPULATION AT ALL AGES.		Registered Births.	CASES NOTIFIED AT SUBJOINED AGES.							NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH										NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITALS.																	
	Census 1901.	Estimated to middle of 1910.		At all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Smallpox.	Cholera.	Diphtheria.	Membranous Croup.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Chicken Pox.	Smallpox.	Cholera.	Diphtheria.	Membranous Croup.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Enteric Fever.	Relapsing Fever.	Continued Fever.	Puerperal Fever.	Plague				
URBAN SANITARY DISTRICTS }	202,950	254,686	5,821	1,218	11	287	600	108	181	31	..	..	176	18	157	798	..	53	..	..	16	..	..	..	40	..	..	566	..	12	..	..	..	..	..	..	..	..
RURAL SANITARY DISTRICTS }	144,743	160,422	4,039	1,533	14	458	791	111	149	8	..	..	198	..	99	1204	..	24	1	..	7	..	..	..	55	..	..	781	..	2	..	..	..	..	..	..	..	..
TOTALS..	347,693	415,108	9,860	2,751	25	745	1391	219	330	39	..	..	374	18	256	2002	..	77	1	..	23	..	..	..	95	..	..	1347	..	14	..	..	..	..	..	..	..	..

G. TABLE shewing SANITARY WORK done in the INSPECTORS OF NUISANCES' DEPARTMENTS during the Year 1910, in the
URBAN SANITARY DISTRICTS of the COUNTY OF WARWICK.

[illegible]

H. TABLE shewing SANITARY WORK done in the INSPECTORS OF NUISANCES' DEPARTMENTS during the Year 1910, in the RURAL SANITARY DISTRICTS of the COUNTY OF WARWICK.

[illegible]

1. RETURN, shewing the number of Births Registered, together with the number of such cases successfully Vaccinated or otherwise disposed of in the Districts of the COUNTY OF WARWICK during the year ending 30th June, 1910.

VACCINATION DISTRICTS.	No. of Births Registered during the year ending 30th June, 1910.	No. of these cases successfully Vaccinated.	Insusceptible of Vaccination.	Died before Vaccination.	Cases under Postponement.	Removals to other Districts out of the Union.	No. of cases not to be found.	Number of cases remaining Unvaccinated at date of this Return.	No. of Conscientious Certificates.
URBAN DISTRICTS.									
Aston Manor... ..	1,990	1,347	11	183	59	16	271	50	53
Bulkington	52	20	...	6	1	...	3	...	22
Erdington	796	643	6	41	16	15	18	...	57
Kenilworth	116	77	...	4	...	...	1	6	28
Royal Leamington Spa	432	249	...	22	3	2	9	7	140
Nuneaton	1,199	252	1	84	13	5	37	7	800
Rugby	422	69	...	19	3	...	7	29	295
Stratford-on-Avon ...	181	112	...	5	1	...	1	4	58
Sutton Coldfield ...	396	285	...	24	9	3	10	2	63
Warwick	345	250	...	10	7	2	9	...	67
RURAL DISTRICTS.									
Alcester	261	155	...	22	...	1	2	2	79
Atherstone	621	258	...	43	19	16	28	17	240
Brailes	98	54	1	2	3	1	...	...	37
Castle Bromwich ...	58	43	1	3	...	...	3	2	6
Coventry	13	9	...	1	...	...	...	...	3
Farnborough... ..	26	9	...	1	2	...	...	...	14
Foleshill	691	236	...	56	4	3	14	3	375
Meriden	264	195	...	12	5	8	4	5	35
Monks Kirby	30	15	...	...	1	...	...	...	14
Nuneaton	80	50	...	7	1	...	3	...	19
Rugby	411	100	1	29	10	3	15	16	237
Solihull	351	296	1	15	1	3	2	5	28
Southam	249	107	...	19	1	1	...	3	118
Stratford-on-Avon ...	412	178	...	11	2	1	6	86	128
Tamworth	471	315	...	26	13	4	7	8	93
Warwick	210	133	...	6	1	5	...	3	62
TOTALS	10,175	5,457	22	651	175	89	450	255	3,076

	Miss Lowe.	Miss Freeberne.	Miss Morrison.	Mrs. Lord	Miss Chorlton.	Miss Hunter.	Miss King.	Miss Wheatley.	Miss Brown.	Miss Houghton.	Miss Underwood.	Total.
Total No. of Visits made ..	310	1,183	1,054	1,172	1,361	1,250	415	336	377	416	526	8,400
" " to Infants ..	39	161	93	131	174	158	17	70	18	66	281	1,208
" " to Midwives ..	34	102	70	98	127	58	46	17	38	37	75	702
" " to Sch. Children	175	626	642	645	910	629	303	211	246	249	104	4,740
Total Number of other Visits ..	62	294	213	255	127	405	39	38	73	64	66	1,636
Number of Health Talks given ..	3	—	—	6	5	3	—	2	2	2	—	23
Lectures to Midwives ..	—	—	—	—	3	—	—	—	—	—	—	3
ANALYSIS OF VISITS.												
INFANTS.												
Mode of Feeding.												
1st or 2nd Visit ..	38	149	77	131	171	157	17	70	18	53	281	1,162
Breast ..	24	85	60	89	97	93	12	43	16	41	129	689
Partly ..	1	35	7	8	19	21	3	13	2	5	20	134
Artificial ..	11	29	10	40	35	38	2	14	—	7	29	215
Condition.												
Wasting ..	—	3	1	4	13	3	—	1	—	1	23	49
Improperly Fed ..	1	23	7	13	13	9	—	8	3	4	40	121
Badly Clothed ..	—	2	—	—	7	—	—	1	—	—	16	26
Neglected ..	3	8	—	1	8	—	—	1	—	—	2	23
To be Weaned or Vaccinated	—	11	1	5	4	2	—	5	1	—	2	31
Cots ..	18	34	8	73	17	28	5	9	7	5	25	229
School Children.												
Number of Visits ..	175	626	644	645	879	629	297	211	214	249	104	4,673
Number of Children Visited ..	210	717	628	754	859	758	257	245	301	222	128	5,079
Heads Ulcerated or Verminous	32	239	75	135	196	215	45	67	43	66	34	1,147
Neglected ..	19	68	22	74	41	22	5	2	4	5	22	284
Clothing ..	2	17	21	8	21	—	—	—	—	5	16	90
Other Diseases ..	154	438	507	219	606	475	227	180	258	152	82	3,298
Housing Defects.												
Dirty Beds ..	6	43	8	9	46	—	2	3	7	2	8	134
Dirty Rooms ..	4	44	77	31	105	11	3	15	9	4	32	335
Dirty Closets ..	3	—	2	1	40	2	—	5	2	1	3	59
Stopped-up Drains ..	3	—	4	—	27	3	—	3	1	1	—	42
Windows to be opened	—	—	13	1	67	—	—	—	—	—	55	136
Pantries Unventilated ..	—	—	—	1	26	1	2	2	1	—	29	62
Damp Houses ..	—	5	9	5	34	3	1	1	—	7	13	78
Overcrowding ..	1	2	6	13	34	3	—	3	—	3	7	72
MIDWIVES.												
Register.												
Number of Inspections ..	18	74	49	98	68	51	19	12	21	21	18	449
Satisfactory ..	18	59	39	87	36	44	18	11	17	17	13	359
Unsatisfactory ..	—	3	10	6	31	3	1	1	4	4	5	68
Bag.												
Satisfactory ..	17	57	36	90	38	46	19	12	19	18	16	368
Unsatisfactory ..	1	3	12	4	29	3	—	—	2	3	2	59
Appliances.												
Satisfactory ..	17	59	42	89	48	46	17	10	14	15	12	369
Unsatisfactory ..	1	1	10	5	19	2	2	2	7	6	6	61
Cleanliness of Midwife												
(Satisfactory) ..	18	71	45	62	52	49	19	12	20	20	13	381
Cleanliness of House												
(Satisfactory) ..	17	72	45	66	52	49	19	12	20	21	16	389

K. METEOROLOGICAL OBSERVATIONS taken at the Park Lodge and Council House, Sutton Coldfield, during the Year ending 31st December, 1910, by the Park Forester (Mr. H. HARLOND).

Lat.: 52 deg. 33 mi. 22 sec., N. Long.: 1 deg. 49 mi. 42 sec., W
Height of Rain Gauge above Sea Level, 370·5 feet.

MONTH.	RAINFALL.			BAROMETER.				THERMOMETERS.										SUNSHINE.		MONTH.
	Total Depth in inches.	Number of days on which Rain fell.	Greatest fall in 24 hours.		Highest Corrected Readings.		Lowest Corrected Readings.	In SHADE.			Highest Readings in Sun.		Lowest Readings on Grass.		Hours.	Mins.				
			Depth.	Date.	Inches.	Date.		Inches.	Date.	Degrees.	Date.	Degrees.	Date.	Degrees.						
																	Highest Readings.	Lowest Readings.	Mean Temperature for the Month.	
January ..	2.02	17	.41	23rd	30.470	5th	28th	28.739	28th	53.0	3rd	27th	37.2	77.4	31st	6.4	27th	56	45	January
February..	2.95	24	.49	20th	30.313	9th	19th	29.060	19th	52.7	8th	5th	39.0	88.0	27th	18.5	5th	76	17	February
March	0.54	8	.20	7th	20.572	31st	1st	29.363	1st	58.7	1st	16th	41.1	106.7	22nd	15.6	30th	147	52	March
April	2.63	17	.58	16th	30.578	1st	13th	29.110	13th	60.0	22nd	3rd	44.2	116.9	22nd	15.6	3rd	106	34	April
May	1.81	18	.29	17th	30.295	26th	31st	29.444	31st	75.3	24th	11th	50.9	127.0	21st	17.0	11th	180	35	May
June	0.97	8	.28	23rd	30.421	16th	25th	29.640	25th	81.2	20th	17th	58.5	130.3	19th	27.6	17th	167	38	June
July	2.40	12	.72	5th	30.178	14th	6th	29.607	6th	76.2	15th	31st	58.1	124.5	15th	34.0	31st	151	33	July
August ...	4.30	17	.98	23rd	30.072	10th	23rd	29.675	23rd	74.2	12th	23rd	58.8	133.4	1st	27.5	23rd	132	42	August
September.	0.75	6	.67	14th	30.412	23rd	1st	30.036	1st	70.0	3rd	21st	53.5	116.4	9th	26.3	21st	123	16	September
October ...	2.22	11	.43	19th	30.567	6th	19th	29.710	19th	68.3	2nd	18th	49.9	109.0	2nd	29.6	18th	67	21	October
November.	4.34	20	1.08	27th	30.164	19th	7th	28.690	7th	52.5	1st	22nd	34.7	86.4	5th	14.0	22nd	58	26	November
December .	5.04	25	.92	1st	30.217	30th	9th	28.990	9th	53.0	24th	28th	40.9	72.1	19th	17.3	28th	20	33	December
TOTALS	20.07	183															Total	1289	32	

W. A. H. CLARRY, Borough Surveyor.

L METEOROLOGY TABLE OF LEAMINGTON SPA, 1910.

Latitude 52° 18' N. Longitude 1° 30' W.

Month.	Means of Barom. at 10 a.m.	Means of Ther. at 10 a.m.	AIR TEMPERATURES.						Direction of the Prevailing Wind.	RAINFALL.	
			Means of		Absolute Temperatures.			Inches.		Days.	
			Max.	Min.	Max.	Date.	Min.				Date.
January ...	29.78	38.0	43.00	33.00	57	3rd.	17	27th.	W.	2.38	22
February ...	29.56	40.0	44.53	35.60	52	8th.	29	4th.	S.W.	2.56	24
March ...	30.12	43.2	49.71	36.49	58	31st.	31	4th, 13th, 29th.	W.	0.62	10
April ...	29.83	46.6	51.96	41.33	62	22nd.	31	3rd.	N.E.	1.76	17
May ...	29.86	54.2	61.39	47.09	76	24th.	35	9th.	N.E.	1.58	22
June ...	29.88	61.8	68.73	54.77	80	4th, 20th, 21st.	47	14th.	N.E.	1.61	12
July ...	29.86	60.2	65.80	54.63	76	15th.	49	25th.	N.E.	2.61	15
August ...	29.86	61.7	67.84	55.58	77	15th	51	23rd, 25th.	S.W.	3.12	20
September ...	30.19	57.7	62.80	52.60	70	29th.	39	21st.	N.E.	0.66	6
October ...	30.02	52.0	55.81	48.13	68	2nd.	44	15th, 20th, 30th.	N.E.	1.97	11
November ...	29.58	37.2	41.57	32.87	52	1st.	24	23rd.	N.W., W., S.W.	4.38	23
December ...	29.66	42.7	45.94	39.45	53	6th.	27	28th.	S.E., S., S.W., W.	3.75	27
TOTALS ...	...	...	...	...	...	...	...	...	...	27.00	209
MEANS ...	29.85	49.6	54.92	44.29	80	June 4, 20, 21.	17	January 27th.	W.	...	...

1911.

—
WARWICKSHIRE COUNTY COUNCIL.
—

ANNUAL REPORT

OF THE
COUNTY MEDICAL OFFICER
OF HEALTH,

For the Year 1910.

THE ROBERT SPENNEL PRESS, WARWICK.